

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026241

FILED
Jul 01, 2004
Secretary of State

Entity Name: SHREE RAM CREAMERY INC.

Current Principal Place of Business:

COBBLESTONE VILLAGE STATE RD. 312
SAINT AUGUSTINE, FL 32080

New Principal Place of Business:

COBBLESTONE VILLAGE STATE RD. 312
103
SAINT AUGUSTINE, FL 32080

Current Mailing Address:

COBBLESTONE VILLAGE STATE RD. 312
SAINT AUGUSTINE, FL 32080

New Mailing Address:

427 ANASTASIA BLVD
SAINT AUGUSTINE, FL 32080

FEI Number: 04-3750451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, BHAVNA
427 ANASTASIA BLVD.
SAINT AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PATEL, BHAVNA
Address: 427 ANASTASIA BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: SD () Delete
Name: PATEL, SURESH
Address: 427 ANASTASIA BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BHAVNA PATEL

PD

07/01/2004

Electronic Signature of Signing Officer or Director

Date