2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000058446

1. Entity Name

PARKLAND FOOD AND BEVERAGE, INC.



Principal Place of Business

Mailing Address

7391 NORTH STATE ROAD SEVEN PARKLAND, FL 33073

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FILED Jan 31, 2006 8:00 am Secretary of State

01-31-2006 90013 039 ***150.00

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01182006 No Chg-P CR2E034 (11/05)

81-0619467

Applied For Not Applicable

5. Certificate of Status Desired

4. FEI Number

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SARKAR, SADHAN 4144 NW 41 DR COCONUT CREEK, FL 33073

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	named entity submits this statement for the pons of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or both,	in the State of Florida. I am familiar with, and accep	t
SIGNATURE_	•:					
	Signature, typed or printed name of registered agent and title	il applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	NOW!!! FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SARKAR, SADHAN 4144 NW 41 DR COCONUT CREEK, FL 33073					

DV TITLE MODAK, DILIP K NAME STREET ADDRESS 4144 NW 41 DR COCONUT CREEK, FL 33073 CITY-ST-ZIP TITLE GUPTA, RAJIT D NAME STREET ADDRESS 4144 NW 41 DR CITY-ST-ZIP COCONUT CREEK, FL 33073 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SADHAU SARKAR PEDER-PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Pres)

20/26/10

Daytime Phone #