2005 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
May 13, 2005 8:00 am
Secretary of State

04-18-2005 90288 003 ***150.00

DOCUMENT # P04000078475

1. Entity Name
GEETA'S MARKET AND FAST FOOD, INC.

66017073

Principal Place of Business	Mailing Address
5931 OLD WINTER GARDEN RD. ORLANDO, FL 32835 US	5931 OLD WINTER GARDEN RD. ORLANDO, FL 32835 US

04042005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
GEETA'S MARKET.	SAME AS ABOVE
Suite, Apt. #, etc. 5931 Old Winter Garden Rd	Suite, Apt. #, etc.
City & State ORLANDO FL	City & State
Zip 32835 Country USA	Zip Country

4. FEI Number 61-1471318 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SUGRIM, VISHNUNARINE 5931 OLD WINTER GARDEN RD. ORLANDO, FL 32835	Name SUGRIM, VISHNUNARINE Street Address (P.O. Box Number is Not Acceptable) 5931 Old Winter Garden Rd City ORLANDO FL Zip Code 32835

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 05·10·05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SUGRIM, VISHNUNARINE 5931 OLD WINTER GARDEN RD ORLANDO, FL 32835	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME AS ABOVE	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] 05·10·05 407 294 0385
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #