

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90077 041 ***150.00

DOCUMENT # P05000005551

1. Entity Name

BINI & REMA, INC.



Principal Place of Business

**3480 GOLDEN ST
TITUSVILLE FL 32796**

Mailing Address

**3480 GOLDEN ST
TITUSVILLE FL 32796**

2. Principal Place of Business - No P.O. Box #

3480 GARDEN ST.

Suite, Apt. #, etc.

3. Mailing Address

3480 GARDEN ST.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)



City & State

TITUSVILLE, FL

Zip
32796

Country

City & State

TITUSVILLE, FL

Zip
32796

Country

4. FEI Number **65-1257011**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PATEL, VINESH R
4125 N. US 1
COCOA FL 32927**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 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, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PT** ☐ Delete
NAME **PATEL, VINESH R**
STREET ADDRESS **3480 GOLDEN ST**
CITY-STATE-ZIP **TITUSVILLE FL 32796**

TITLE **VP** ☐ Delete
NAME **PATEL, HASMUKH**
STREET ADDRESS **3480 GARDEN ST**
CITY-STATE-ZIP **TITUSVILLE FL 32796**

TITLE **S** ☐ Delete
NAME **NARENDRA, PATEL**
STREET ADDRESS **3480 GORDEN ST**
CITY-STATE-ZIP **TITUSVILLE FL 32796**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

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NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: **Vinesh R Patel**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/07 321-269-9310

Date

Daytime Phone #