

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000070325

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** SHREE KABIR OF PANAMA CITY INC.

**Current Principal Place of Business:**

3433 15TH ST E  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

2908 HARRIER ST  
PANAMA CITY, FL 32405

**New Mailing Address:**

**FEI Number:** 45-2963900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AMIN, BHAVESH J  
2908 HARRIER ST  
PANAMA CITY, FL 32405 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BHAKTA, JAYESH M  
**Address:** 8042 U.S HWY 98 WEST  
**City-St-Zip:** PORT SAINT JOE, FL 32456

**Title:** VP  
**Name:** AMIN, BHAVESH J  
**Address:** 2908 HARRIER ST  
**City-St-Zip:** PANAMA CITY, FL 32405

**Title:** DIR  
**Name:** PATEL, DAMYANTI  
**Address:** 710 E. 15 ST  
**City-St-Zip:** PANAMA CITY, FL 32405

**Title:** DIR  
**Name:** BHAKTA, SHASHIKALA B  
**Address:** 8042 U.S HWY 98  
**City-St-Zip:** PORT SAINT JOE, FL 32456

**Title:** DIR  
**Name:** AMIN, SWAPNIL J  
**Address:** 4933 E. BUS HWY 98  
**City-St-Zip:** PANAMA CITY, FL 32404

I hereby 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 all other like empowered.

**SIGNATURE:** AMIN BHAVESH

VP

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date