## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 12 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000041335 (9)

## YOGI FOOD INCORPORATED

appears in Block 12 or Block 13

rincipal riace	B OF BUSINESS	Mailing Address								
5766 TURNWOO JUPITER FL 33		5766 TURNWOOD COURT JUPITER FL 33458-7937								
						Incorporated or Qualified	3a. Date 0		eport	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI I			Ap	plied For	
21		26 401 LAKE	6 401 LAKE AVE			<b>65-0389570</b> Not Applic			t Applicable	
Suite, Apt	#. etc.	Suite, Apt. #, etc.	-			ficate of Status Desired		8.75 / Fee Re	Additional equired	
City & State	3	City & State	City & State			ion Campaign Financing		\$5.00	May Be	
23		28 LAKEWORTH	LAKEWORTH, FL			Fund Contribution	Added to Fees			
Zip	Country	Zip	Coun	lry	8. This	corporation has liability for	intangible tax	under s.	199.032,	
24	25	29 33460	30				]Yes □ N			
	9. Name and Address of Currer	nt Registered Agent			10. Nam	e and Address of New Re	gistered Age	nt		
PAT	EL, YOGESH		1	Name	PATEL	LAYAN.				
	B TURNWOOD COURT		<b>L</b> .			ddress (P.O. Box Number is Not Acceptable)				
	ITER FL 33458		[]		5 Bu	(TON LN	010)			
-				33	3					
				City B	hothyo	BEACH	FL	5 Zip (	Code	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was a	uthorized	by the corpo	corporation sub cration's board	mits this statement for the of directors. I hereby acce	purpose of ch pt the appoin	ment as	registered	
SIGNATURE		v. Patl					2.	<b>₿</b> , ¢	ትግ	
OIGHATORE.	Signature, typed or pented name of registered ag	ent and tide if applicable {NOTE	Registered	Agent signature r	aquired when reinste		DATE			
12.		ID DIRECTORS	13.	<del></del>	ADDI*	TIONS/CHANGES TO OFFI				
THILE	D	DELETE	1.1 T(T)	.E			L	Change	Addition	
NAME	PATEL, YOGESH		1.2 NA	AE						
STREET ADDRESS			1.3 STF	EET ADDRESS						
C(TV - ST - 7)P	JUPITER FL 33458	ER FL 33458 1.40		Y - ST - ZIP						
TITLE	D	☐ DELETE 2.1		.E				Change	Addition	
NAME	PATEL, NAYAN	ATEL, NAYAN 22		ME						
STREET ADDRESS			2.3 STF	2.3 STREET ADDRESS						
CITY-ST-ZIP	BOYNTON BEACH FL 33462		2. 4 DI	2. 4 DITY-ST-ZIP		*				
TITLE	D	☐ DELETE	3 1 TiT	.E				Change	Addition	
NAME	PATEL, RAJESH		3.2 NAI	ME						
STREET ADDRESS	6900-WOONSOCKET-		3.3 STF	EET ADDRESS	.49848	3 COOKE				
CITY-ST-7IP	CANTON MI 48187		3.4. CII	Y-ST-ZIP	PLYMO	LTH, MI 48	170			
TITLE		☐ DELETE	4.1 717	.E	7			Change	Addition	
NAME			4. 2 NA	ME						
STREET ADDRESS			4.3 STF	REET ADORESS						
City-S1-7IP			4.4 CIT	Y-ST-ZIP						
TITLE		☐ DELETE	5.1 TIT				L	Change	Addition	
NAME			5.2 NA	ME						
STREET ADDRESS				REET ADDRESS						
CITY-ST-ZIP				Y-ST-7%P		•				
TITLE		☐ DELETE	6.1 TiT	<del></del>			L	Change	Addition	
NAME.			6.2 NA	1				-	<del></del>	
OPMEL.										
STREET ADDRESS	1			HEET ADDRESS						

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

14. I do 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 annual report or supplemental annual 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 comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name