1997 DVISION OF CORPORATIONS COULTMENT # P93000043376 (1) LUCKY DISCOUNT BEVERAGES & FOOD, INC. County of Control of County of Coun		Profit Poration Jal Repor	т	FI	LORIDA DEPAF Sandra E Secreta		àm	Mar 10			
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ORLANDO FL 32806 83 84 City FL 85 Zip Code 94 City FL 85 Zip Code 95 Feat familian with and accept the obligations of. Section 607 2005, Fhorida Statutes, the above registered of directors. Thereby accept the appointment as registered agent recules were instations? DATE 95 For the relation back of registered agent recules agent recules were instation? DATE 91 City 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 11 Ittle 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 Statematics 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14 PAStates 13 11 Ittle Change 15 AST Conses 300 CURRY FORD RD. 23 Stret Adoress 16 S	PAT						81 Name				
Bail Bail Bail Bail City FL Bail Zip Code Pursation to the provisions of Sections 607.0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I can tamblar with, and accept the obligations of, Section 607.0505, Florida Statutes. The registered agent, or both, in the Statu of Bolida. Socion 607.0505, Florida Statutes. SNATURE OFFICE HS AND DIRECTORS 10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NATURE OFFICE HS AND DIRECTORS 11 Intel PO PATEL, NARENDRA J 12 NWA City and accept the appoint accept the appo							82 Street Add	Iress (P.O. Box Number is Not Accept	otable)		
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Public to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent contractions due to belighted as the belighted a							84 City			85 ZID	Code
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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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	SINATURE E E E E E E E A E C S T Z D A E A E C S T Z D A E C S T Z D A C S T Z D A C S S S S S S S S S S S S S	PO PATEL, NARE 2800 CURRY ORLANDO FI ST DAXSHABEN 2800 CURRY ORLANDO FI	And have of registeric and OFFICE RS AN ENDRA J FORD RD. 32806 , PATEL N FORD RD.	ent erst title ill applicat ID DIRECTORS	DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE does not qual	IE Fregisterat 13. 1.1 1.2 M2 1.3 ST 1.4 CF 2.1 TO 2.4 C 3.1 TO 2.4 C 3.1 TO 3.2 M2 3.3 ST 3.4 C 4.1 TO 5.3 ST 5.4 CI 5.3 ST 5.4 CI 6.3 ST 6.4 CI Ify (or the CI	Agent signature requirement LE ME AEET ADDRESS IY - ST - ZIP LE ME REET ADDRESS IY - ST - ZIP LE ME REET ADDRESS IY - ST - ZIP LE AME REET ADDRESS IY - ST - ZIP LE AME REET ADDRESS IY - ST - ZIP LE ME REET ADDRESS IY - ST - ZIP LE ME REET ADDRESS IY - ST - ZIP LE ME REET ADDRESS IY - ST - ZIP LE ME REET ADDRESS IY - ST - ZIP LE ME REET ADDRESS IY - ST - ZIP Exermition state	ADDITIONS/CHANGES TO O	DATE FRICERS AND	DIRECTOF Change Change Change Change	S IN 12 Addition Addition Addition Addition Addition