

CHECK 1099

ANNUAL REPORT
1995

Shashikant R. Patel
Secretary of State
DIVISION OF CORPORATIONS

95 APR 20 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P44000056200
1. Corporation Name
Midhi Grocers, Inc.

Principal Place of Business Mailing Address
3622 S. Atlantic Avenue
Daytona Beach, Fl 32127

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2a. Mailing Address
21 Suits, Apt. #, etc. 26 Suits, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

3. Date Incorporated or Qualified July 28, 1994 3a. Date of Last Report - N/A -
4. FEI Number 59-3256013 Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
Shashikant R. Patel
3622 S. Atlantic Avenue
Daytona Beach, Fl 32127

10. Name and Address of New Registered Agent
81 Name Shashikant R. Patel
82 Street Address (P.O. Box Number is Not Acceptable) 3622 S Atlantic Avenue
83
84 City Daytona Beach FL 85 Zip Code 32127

11. Pursuant 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *S R Patel* S R Patel President April 17, 1995
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS
TITLE President
NAME Shashikant R. Patel
STREET ADDRESS 3622 S. Atlantic Avenue
CITY - ST - ZIP Daytona Beach, Fl 32127
TITLE Vice President
NAME Same
STREET ADDRESS Same
CITY - ST - ZIP Same
TITLE Secretary
NAME Same
STREET ADDRESS Same
CITY - ST - ZIP Same
TITLE Treasurer
NAME Same
STREET ADDRESS Same
CITY - ST - ZIP Same
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1 1 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
2 1 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
3 1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
4 1 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
5 1 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
6 1 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *S R Patel* S R Patel President April 17, 95 904-756-8034
Signature typed or printed name of signing officer or director (Date) (Daytime) (Home)