

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90038 013 ***150.00

DOCUMENT # 095000026148
1. Entity Name
KELLY FOOD MART INC

Principal Place of Business **Mailing Address** SAME
104 4th STREET NORTH
SAINT PETERSBURG FL 33701

2. Principal Place of Business **3. Mailing Address** SAME
SAME
Suite, Apt. #, etc. **Suite, Apt. #, etc.**

City & State **City & State**
Zip **Country** **Zip** **Country**

4. FEI Number 59-3305267 **Applied For**
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

658788

6. Name and Address of Current Registered Agent
R. G. RAJU CPA PA
8910 N. DALE MABRY HWY #37
TAMPA, FL 33614

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.
SIGNATURE Ramesh B. Patel **DATE** 4.25.01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State
10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS	<u>PD RAMESHBHAI PATEL</u>		STREET ADDRESS		
CITY-ST-ZIP	<u>104 4th ST NORTH</u>		CITY-ST-ZIP		
	<u>SAINT PETERSBURG FL 33701</u>				
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
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TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ramesh B. Patel **DATE** 4.25.01 **Daytime Phone #** (727) 822-7695
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)