

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000051745

Entity Name: BALK FOOD STORE, INC.

FILED  
Jan 12, 2005  
Secretary of State

## Current Principal Place of Business:

4340 BEE RIDGE RD  
SARASOTA, FL 34233

## New Principal Place of Business:

## Current Mailing Address:

4340 BEE RIDGE RD  
SARASOTA, FL 34233

## New Mailing Address:

FEI Number: 65-0615879

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, BHARAT  
4340 BEE RIDGE RD  
SARASOTA, FL 34233 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PATEL, LALIT  
Address: 4521 CHIMNEY CREEK DR  
City-St-Zip: SARASOTA, FL 34235

Title: D ( ) Delete  
Name: PATEL, KAMLESH  
Address: 2977 SEASONS BLVD  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete  
Name: PATEL, BHARAT  
Address: 4868 CEDER OAK WAY  
City-St-Zip: SARASOTA, FL 34233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: PATEL, LALIT  
Address: 8032 WARWICK GARDEN LANE  
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PATEL, BHARAT  
Address: 4868 CEDER OAK WAY  
City-St-Zip: SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KAMLESH PATEL

MR.

01/12/2005

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

\_\_\_\_\_  
Date