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

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600030884

BLID'S MINIMART, INC

000 3 1												
Principal Place of Business			Mailing Address					,		40111 44111 06:60		1111 <b>6161 166</b> 1
1000 CARLTON ARMS BLVD. BRADENTON FL 34208			1000 CARLTON ARMS BLVD BRADENTON FL 34208 US			3.	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  04/09/1996					
2. Principal Place of Business			2a. Mailing Address				4.	FEIN		=	App	liéd For
24	000 0. 245ii.1000	26	· ···					65-0	656156		Not	Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.		cate of Status Desired		\$8.75 A	I
City & State	9	28	City & State				6.		on Campaign Financin Fund Contribution	<sup>19</sup> 🗆	\$5.00 h Added to	
Zip .	Country Zip Co  25 29 30				itry			8. This corporation owes the current year intangible Personal Property Tax. Yes No				□No
.3: 5	9. Name and Address of Curren	t Regis	stered Agent				10	. Nam	e and Address of Nev	w Registered	Agent	(71) 14
DESAI, BHADRESH PRITI 11914 CLUBHOUSE DR BRADENTON FL 34202					81 82 83	Name Street Address (P.O. Box Number is Not Acceptable)						
					84	City				FL	85 Zip C	ode
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Flori	da. Such change was aut	norizea	DV I	ine comora	orporatio ation's b	n subnoard of	nits this statement for t f directors. I hereby ac	he purpose of cept the appoi	changing its introduced the changing its interest of the change of the change of the change of the changing its interest of the chan	egistered istered
SIGNATURE		4 4 894-	WOTE P		A	signature requ	uicad suban	rainetatio		DATE		
	Signature, typed or printed name of registered ager OFFICERS AN			13.	-gent	signature requ			TIONS/CHANGES TO		ID DIRECTO	RS IN 12
<b>12.</b> ππε	.PD	יאוט טוגי	☐ DELETE	1.1 1111	F			ווטטוו	TONO/ONANOZO TO	OTTTO ENG 711	Change	Addition
	DESAI, BHADRESH (BUD)		(,) DESE, 6	1.2 NAJ		-			-			
NAME	44044 OLUBUOLIOE DD				1.3 STREET ADDRESS							ļ
STREET ADDRESS	BRADENTON FL 34202			1.4 CIT								
CITY-ST-ZIP TITLE	VSTD DELETE				2,1 TITLE						Change	Addition
NAME	DESAI, PRITI B			2.2 NAME								
STREET ADDRESS	11914 CLUBHOUSE DR			2.3 STREET ADDRESS								(
	BRADENTON FL 34202			2, 4 CITY-ST-ZIP							•	
CITY-ST-ZIP	BIRDENTON LE 04202		☐ DELETE	3.1 TIT							☐ Change	Addition
NAME				3.2 NA	ME							
STREET ADDRESS				3.3 STF	REET	ADDRESS						
CITY-ST-ZIP				3.4. CI	ry√sī	T-ZIP						
TITLE			☐ DELETE	4.1 TIT							Change	☐ Addition
NAME				4. 2 NA	ME							
STREET ADDRESS				4.3 STI	REET	ADDRESS						
CITY-ST-ZIP	•			4.4 CIT	Y-ST	r-ZIP						

CITY-ST-ZIP 14. 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 annual report or suppliemental 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or an anattachment with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

☐ DELETE

☐ Change

Change

☐ Addition

Addition