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

Mailing Address

6123 26 STREET WEST

BRADENTON FL 34207

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000076372

Country

9. Name and Address of Current Registered Agent

JAY'S MINI MART, INC.

Principal Place of Business

2. Principal Place of Business

PATEL, VARSHA

6123 26 STREET WEST **BRADENTON FL 34207**

Suite, Apt. #, etc.

City & State

6123 26 STREET WEST

BRADENTON FL 34207

US

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Zip

City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation s office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's boar agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required w 12. OFFICERS AND DIRECTORS 13. ΑE ☐ DELETE 1.1 TITLE TITLE PATEL, VARSHA 1.2 NAME NAME **6123 26TH ST WEST** 1.3 STREET ADDRESS STREET ADORESS **BRADENTON FL 34207** 1.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 2.1 TITLE TITLE 2.2 NAME NAME PATEL, JAY 6123 26TH ST WEST STREET ADORESS 2.3 STREET ADDRESS **BRADENTON FL 34207** 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 51 TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

Country

83

30

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90044 019 ***150.00

	DO NOT WRITE IN THIS SPACE	
	3. Date Incorporated or Qualifed	
	09/12/1996	_[
	4. FEI Number Applied For 65-0701240 Not Applied	
	\$8.75 Additional	
	Certificate of Status Desired	
	6. Election Campaign Financing Trust Fund Contribution Added to Fees	
	8. This corporation owes the current year Intangible Personal Property Tax. Yes □ No	
Name	10. Name and Address of New Registered Agent	\dashv
	ddress (P.O. Box Number is Not Acceptable)	_
SHEELA	Juless (F.O. DOX Number is Not Acceptable)	20.
		(#) 12:
City	F1 85 Zip Code	
те согрога	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered uired when reinstating)	d .
	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
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ADDRESS		
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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 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 appears in

SIGNATURE: