P96000097638

BEVERAGE STATIL GAS STATION OKEECHOBEE ROALD, FOHT PIERCE FLORIDA 34947 PHONE # - 772 468 3050 (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200210752112

07/12/12--01024--002 **35.00



JUL 17 2012 C. MUSTAIN

Local

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: BEVERAGE STATION INC
2. The principal office address: 4101, OKER NOBER ROAD
fort-Pierce FL- 34947
3. The mailing address (if different):
SAME AS ABOY 6
4. Date of incorporation/qualification: NOV 1 1996 Document number: P 96 0000 97 63
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Florida Department of State. (If resigned, enter resigned)
RESIGNED
KCOIOINC)
77
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Mr. Niranjan Pathak 332 NW Stratford Ln Port Saint Lucie, FL 34983-3432
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Deepak C. Shah President Standard of an officer or director Deepak C. Shah President
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Mathak 6/28/2012
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)