


FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

122

DOCUMENT # **P 97 06.00 56938**

1. Entity Name
Haples Convenience Food Mart, Inc.



FILED

03 OCT 21 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 11225 Tamiami Trail East		3. Mailing Address 11225 Tamiami Trail E	
Suite, Apt. #, etc. Naples FL		Suite, Apt. #, etc. Naples FL	
City & State 34113		City & State	
Zip	Country USA	Zip 34113	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 593456159	Applied For <input type="checkbox"/>
	Not Applicable

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name HANSRAJ DEONARINE	
Street Address (P.O. Box Number is Not Acceptable) 11225 Tamiami Trail East	
Naples	
City	Zip Code FL 34113

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when restoring) DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	Pres RANDOLPH RAMTAHAL 119 Blue Ridge Dr Naples FL 34112
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V.P. HANSRAJ DEONARINE 1944 Philadelphia Circus Naples FL 34112
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12. 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 10 or on an attachment with an address with all other like empowered.

SIGNATURE: **Randolph Ramtahal** **RANDOLPH RAMTAHAL** 239-641-5660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

10/1/03

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NAPLES Convenience food mart, Inc.

This is to Inform you that we have not
received any UBR Renewal form and was
advised to download form and submit with
payment of \$150.⁰⁰/₂₄.

Thank's

Randy Rountree