2000 UNIFORM BUSINESS REPORT (UBR)

4/3

FILED
Jun 08, 2000 8:00 am
Secretary of State

04-03-2000 90005 022 ***150.00

DOCUMENT # P99000058172

1. Entity Name
RUCHI, INC.

Principal Place of Business	Mailing Address
1832 MANATEE AVENUE EAST BRADENTON FL 34208	1832 MANATEE AVENUE EAST BRADENTON FL 34208-1454

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
GRROVER'S SUPERMARKET	SAME
Suite, Apt. #, etc. 111 17th ST. W	Suite, Apt. #, etc.
City & State PALMETTO. FL.	City & State
Zip 34221 Country MANATEE	Zip Country

4. FEI Number 65-0930017 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134	Name RAMESH PATEL Street Address (P.O. Box Number is Not Acceptable) 3810 5Th ST E. #121 City Bradenton FL Zip Code 34208

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.

SIGNATURE R. A. Patel 5/31/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD PATEL, MAHENDRA S 1832 MANATEE AVENUE EAST BRADENTON FL 34208 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD PATEL, JASVANT B 1832 MANATEE AVENUE EAST BRADENTON FL 34208 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 3/28/00 941-722-4484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #