

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 01, 2001 8:00 am**  
**Secretary of State**

02-01-2001 90171 015 \*\*\*158.75

**DOCUMENT # S32059**

1. Entity Name

**B & K FOOD MART, INC.**

Principal Place of Business

8275 4TH N.  
 ST. PETERSBURG FL 33702  
 US

Mailing Address

~~246 94TH AVE. N.~~ **1201 34th ST. N.**  
 ST. PETERSBURG FL ~~33702~~ **33713**

UUU14400



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**1201 34th ST. N.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**ST. PETERSBURG**

City & State

City & State

**ST. PETERSBURG FL**

4. FEI Number

**59-3052093**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33713**

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

**BHAKTA, BALDEV R.**

~~246 94TH AVENUE NORTH~~

ST. PETERSBURG FL ~~33702~~

**1201 34th ST. N.**  
**33713**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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, 2001 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 **D**  Delete  
 NAME **BHAKTA, BALDEV R.**  
 STREET ADDRESS ~~246 94 AVE. N.~~ **→**  
 CITY-ST-ZIP ~~ST. PETERSBURG FL 33702~~ **→**

TITLE **D**  Change  Addition  
 NAME **BHAKTA BALDEV R.**  
 STREET ADDRESS **1201 34th ST. N.**  
 CITY-ST-ZIP **ST. PETERSBURG FL-33713**

TITLE **D**  Delete  
 NAME **BHAKTA, KALAVATI B.** **→**  
 STREET ADDRESS ~~246 94TH AVE. N.~~  
 CITY-ST-ZIP ~~ST. PETERSBURG FL 33702~~

TITLE **D**  Change  Addition  
 NAME **BHAKTA KALAVATI B.**  
 STREET ADDRESS **1201 34th ST. N.**  
 CITY-ST-ZIP **ST PETERSBURG FL 33713**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

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TITLE  Change  Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

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: **Baldev R. Bhakta**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**BALDEV R. BHAKTA 1-19-01 727321 1149.**  
 Date Daytime Phone #

CR2E034 (10/00)