

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 243288

FILED
Jan 12, 2009
Secretary of State

Entity Name: TWIN OIL COMPANY

Current Principal Place of Business:

15300 NW 7TH AVENUE
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

15300 NW 7TH AVENUE
MIAMI, FL 33169

New Mailing Address:

FEI Number: 59-0932728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLANTE, GABRIEL
15300 NW 7TH AVENUE
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VOLANTE, GABRIEL,
Address: 15973 D'ALENE DR.
City-St-Zip: DELRAY BEACH, FL 33446

Title: ST () Delete
Name: DIAZ, MARIA,
Address: 8003 N.W. 163RD TERRACE
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: PENZI, NANCY,
Address: 2355 N.E. 197TH STREET
City-St-Zip: MIAMI, FL

Title: V (X) Delete
Name: GOLDBERG, MICHAEL W
Address: 4923 NW 110 WAY
City-St-Zip: CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: VOLANTE, GABRIEL,
Address: 15973 D'ALENE DR.
City-St-Zip: DELRAY BEACH, FL 33446

Title: T (X) Change () Addition
Name: DIAZ, MARIA,
Address: 8003 N.W. 163RD TERRACE
City-St-Zip: MIAMI, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GABRIEL VOLANTE

CEO

01/12/2009

Electronic Signature of Signing Officer or Director

_____ Date