2002 UNIFORM BUSINESS REPORT (UBR)

Feb 26, 2002 8:00 am Secretary of State L84086 ³ DOCUMENT # 1. Entity Name 02-26-2002 90050 047 ***150 RISSER OIL CORPORATION Principal Place of Business Mailing Address 2865 EXECUTIVE DRIVE 2865 EXECUTIVE DRIVE C/O COPPERWHEAT. JACQUELYN C/O COPPERWHEAT, JACQUELYN CLEARWATER FL 33762 **CLEARWATER FL 33762** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 59-3017760 Not Applicable Country ZipCountry Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RICE, MARTIN ERROL Street Address (P.O. Box Number is Not Acceptable) 333 THIRD AVE N. SUITE 235 ST PETERSBURG FL 33701 City Zip Code FI 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE ☐ Change ☐ Addition ☐ Delete TITLE RISSER, P. N. III NAME NAME 2865 EXECUTIVE DRIVE STREET ADDRESS STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME MITCHELL, BRUCE NAME STREET ADDRESS 2865 EXECUTIVE DRIVE STREET ADDRESS CLEARWATER FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME COPPERWHEAT, JACQUELYN NAME STREET ADDRESS 2865 EXECUTIVE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL ☐ Addition ☐ Delete TITLE P Change TITLE KATCHUK, KERRY NAME NAME 2865 EXECUTIVE DRIVE STREET ADDRESS STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME PELLEGRINO, DAVID NAME 2865 EXECUTIVE DRIVE STREET ADDRESS STREET ADDRESS **CLEARWATER FL 33762** CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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Copperentent CoepSecy 1/31/02 (127) 573-4000

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.