

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91882 010 \*\*\*150.00

**FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** P02000080005  
 1. Entity Name  
 MEGA FUEL, INC.

90129091

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
 2890 PALM AVE  
 Suite, Apt. #, etc.

3. Mailing Address  
 1410 NW 200TH TERRACE  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
 HIALEAH, FL

City & State  
 MIAMI, FL

4. FEI Number  
 30-0096876

Applied For  
 Not Applicable

Zip  
 33010-1716

Country

Zip  
 33179

Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE  
 IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
 GUILLERMO PENA

Street Address (P.O. Box Number is Not Acceptable)  
 1410 NW 200TH TERRACE

City  
 MIAMI

FL

Zip Code  
 33179

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT GUILLERMO PENA 1410 NW 200TH TERRACE MIAMI, FL 33179	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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:

*Guillermo Pena*

PRESIDENT

4/30/2003

305-945-7892

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR