

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P04804

1. Entity Name

USA PETROLEUM CORPORATION

Principal Place of Business

30101 AGOURA COURT
200
AGOURA HILLS CA 91301
US

Mailing Address

30301 AGOURA COURT
200
AGOURA HILLS CA 91301
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-3942080

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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, 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

TITLE ☐ Delete
NAME COB
MOLLER, JOHN J.
STREET ADDRESS 30101 AGOURA CT., SUITE 200
CITY-ST-ZIP AGOURA HILLS CA

TITLE ☐ Delete
NAME P
CONANT, MARK
STREET ADDRESS 30101 AGOURA CT., SUITE 200
CITY-ST-ZIP AGOURA HILLS CA

TITLE ☐ Delete
NAME S
SCHYLER, LYLE
STREET ADDRESS 30101 AGOURA CT., SUITE 200
CITY-ST-ZIP AGOURA HILLS CA

TITLE ☐ Delete
NAME T
LEE, MARY
STREET ADDRESS 30101 AGOURA CT., SUITE 200
CITY-ST-ZIP AGOURA HILLS CA

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME Kriston D. Qualls
STREET ADDRESS 30101 Agoura Ct. #200
CITY-ST-ZIP Agoura, CA 91301

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

Mark Conant

Jan. 14, 2000 818-865-

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9200

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90055 037 ***150.00

00008714



DO NOT WRITE IN THIS SPACE