## FILED Apr 30, 2007 8:00 am Secretary of State 04-13-2007 90155 009 \*\*\*150.00

## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000141838  1. Entity Name ELITE PETROLEUM, INC.											
Principal Place	e of Business	<u> </u>		Mailing Address			7				
6309 15TH STREET EAST 6309 15TH STREET EAS SARASOTA, FL 34243 US SARASOTA, FL 34243							417777817	r dánd árm SSTI SSTIF F	esen <del>meni</del> erê pi de	n nai wa m	
2. Principal Place of Business - No P.O. Box #				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			03122007	Chg-P	CR2E03	34 (12/06)	
City & State				City & State			4. FEI Numb	* 2058	6919	NK.	plied For Applicable
Zip	Country		-	Zip Coun		ilry	5. Certificate	5. Certificate of Status Desired			
	5. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
ATTARI, KAYVAN						Name					
4002 61\$T AVENUE E BRADENTON, FL 34203				_	Street Addres	Street Address (P.O. Box Number is Not Acceptable)					
2											
:						City			FL	Zip Cod	8
			statement for th	ne purpose of changing i	is register	ed office or regi	stered agent, or bo	oth, in the State of F	lorida, i em l	smilier with,	and accept
the obligations of registered agent.											
SIGNATURE.	Dolgare, 19040	or previous names of re	egetered agent and	Me i applicable, (NC	)TE: Pagister	nd Agent storistice requ	used when reinstating)		DATE		
PILE NOWIII FEE IS \$150.00 After May,1, 2007 Pee will be \$550.00  9. Election Campaign Financing \$5,00 May Be Trust Fund Contribution.   Added to Fees											
10,	OFFICERS AND DIRECTORS						ADDITIONS	/CHANGES TO OF		_	
IITLE MANE	P ATTARI, I	KAYVAN		Delete	JITE HAN					☐ Change	Addition i
STREET ADDRESS	4002 61ST AVENUE E					EET ADDRESS					
TITLE	S	TON, FL 342	203	Detete 107LE		(-S1-ZIP		<del> </del>		☐ Change	☐ Addition
KAME	GHASEMI, SHIMA			HAN		€				_ ~ <b>_</b>	
STREET ADDRESS CITY-ST-ZIP		T AVENUE E TON, FL 342				EEF ADORESS   -ST-ZIP					
mu:	Delete III					E				Change	☐ Addition
HAME STROUT ADDRESS	,					ie Let adoress					
C/TY+ST-ZIP						-\$1-ZIP					
TITLE NAME				☐ Delete	TITL MAA					Change	Addition
STREET ADDRESS CITY-ST-ZIP					STR	EET ADORESS '- ST - ZIP					
TITLE				☐ Delete	TITL			·		Change	Addition
STREET ADDRESS					NAA Stri	EET ADORESS					
CITY-SI-ZIP						-51-2iP					
TITLE NUME				☐ Delete	FILL					Change	Addition
STREET ADDRESS CITY-ST-ZIP			_		STR	FET ADORESS 1-ST-ZIP		_	_		
12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained 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 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-dimpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with aggiggless, with all other like empowered.											
		/			<del>,</del>		04	-10-07	941-7	58-05	50
SIGNATURE: 04-10-01 941-758-0550											