FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000035159 (9)**

1. Corporation Name

EAGLE STAR PETROLEUM ENTERPRISES, INC.

Principal Place of Business
1601 N.W. 119TH STREET
NORTH MIAMI FL 33167

Mailing Address
1601 N.W. 119TH STREET
NORTH MIAMI FL 33167

3. Date Incorporated or Qualified: **05/04/1995**
3a. Date of Last Report:

2. Principal Place of Business
21 | 22 | 23 | 24 | 25

2a. Mailing Address
26 | 27 | 28 | 29 | 30

4. FEI Number: **65-0579486** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PEQUENO, TOMAS
2333 PONCE DE LEON BLVD.
PH 1120
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0501 and 617.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE | Date

12. OFFICERS AND DIRECTORS

D
PEQUENO, TOMAS
1601 N.W. 119TH ST.
NORTH MIAMI FL 33167

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN #12

1 TITLE
2 NAME
3 STREET ADDRESS
4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 12 or Block 13 if changed, or on an attached report with an address.

SIGNATURE: Pequeno 2-9-96 (305) 661-1981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)