## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000064179 (1)

A & S PETROLEUM, CORP.

Principal Place of Business

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

8709 56TH ST TEMPLE TERR/ US		8709 56TH TEMPLE TE US	ST N RRACE FL 33617-62	201		Date Incorporated or Qualified	3e. Date of La	not Deport
						08/21/1995	03/19/198	
2. Principal F	Place of Business	2a. Mailing	Address			4. FEt Number 59-3331204		Applied For
Suite, Apt.	#, etc.		Apt. #, etc.			5. Certificate of Status Desired		Not Applicable 75 Additional be Required
City & Stat	е	City & 28	State			Election Campaign Financing     Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Zip		Country		6. This corporation has liability for in		for s. 199.032,
24	25	29	30	L.,			Yes No	
	9. Name and Address of Curren	t Registered A	gent	81	T	10. Name and Address of New Reg	ilstered Agent	·····
AMOUDI, AHMAD A 7707 CITRONELLA COURT					Name Street Ade	gress (P.O. BoydNumber is Not Acceptable	le)	······································
TAMPA FL 33625					870	1 56th St. N.		······
				83	T-C-00	No review FI	33417	_
					City			Zip Code
44.5					Tem	pleTerrace		33617
office or	to me provisions of Sections 607.050. registered agent, or both, in the State	of Florida, Such	, Florida Statutes, i n change was auth	tne above orized by	e-named co y the corpor	dooration submits this statement for the pu ation's board of directors. I hereby accep	urpose of changi t the appointmer	ng its registered it as registered
age (1)	familia with and accept the obliga	ntions of Sectio	n 607.0599, Florida	Statute	5 / F	,	-(	Ū.
SIGNATURO	And Mode a right name of registered age		ovoli, f	MEIC	yen!	uired when reinstating)	15/97	
12.	OFFICERS AND		e (NOTE: NO	13.	on signatore req	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
TITLE	18		DELETE	1.1 TITLE	· I ·		Cha	
NAME	AMOUDI, AHMAD A.			1.2 NAME	Ì			•
STREET ADDRESS	16812 LANDING POINTE LN #	104		1.3 STREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL 33624			1.4 CITY - S	ST-ZIP			
TITLE	V, P.		DELETE	2.1 TITLE			Cha	nge Addition
NAME	AMOUDI, ALI 10812 LANDING TAMPA, FL 33	_		2.2 NAME				
STREET ADDRESS	16812 LANDING	PONTE	LN#107	2.3 STREET	ADDRESS			
CITY - ST - ZIP	TAMOA, FL 33	624	·	2. 4 CITY-	ST-ZIP			
TITLE			DELETE	3.1 TITLE			☐ Cha	nge 🔲 Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-7IP				3.4. CITY-5	ST-ZIP			
TITLE			DELETE	4.1 TITLE			Cha	nge Addition
NAME				4. 2 NAME		+.		
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY - S1 - ZIP				4.4 CITY - S	ST-ZIP			

FILED Feb 11 1997 8:00am Secretary of State

Change

Change

Addition

Addition



14. If do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual 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 conversion or the deciver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 2 or Block 13 thanged, or or an attachment with an address.

SIGNATURE A SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESENT 1/15/97 (818)885-5747

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY - ST - ZIP

DELETE

DELETE