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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000071198 (2)

WPB FUEL, INC.

FILED Feb 13 1998 8:00am Secretary of State

|--|

| Principal Place | of Business | Mailing Address | | | | 1 14415881 114 18181 8141 88111 88111 88111 88111 88111 8 | 1841 11 461 1541 | in inini 1861 1861 |
|------------------|---|---|------------------------------------|------------------|--------------------|---|-------------------------|------------------------|
| | ANDS CIRCLE | | 7761 HIGHLANDS CIRCLE | | | | | |
| MARGATE FL 33063 | | MARGATE FL | MARGATE FL 33063 | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | 3. Date Incorporated or Qualified | | |
| | | | | | | 09/14/1995 | | |
| 2. Principal P | ace of Business | 2a. Mailing Addre | 988 | | | 4. FEI Number | | Applied For |
| 21 | | 26 | | | | 65-0604381 | | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, | etc. | | | 5. Certificate of Status Desired | | Additional Required |
| 22 City P State | | City & State | | | | a Floring Compaign Financing | | |
| City & State | 9 | 28 | | | | 6. Election Campaign Financing Trust Fund Contribution | | O May Be d to Fees |
| Z ip | Country | Z6j | | ountry | , | This corporation owes or has paid the cu | | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due June 30. | Yes | ☐ No |
| 241 | g. Name and Address of Curre | | | T | | 10. Name and Address of New Registered | Agent | |
| | ORAK, MORTON | | | 81 | Name | | | |
| | 761 HIGHLAND CIRCLE | | | 82 | Street Ad | ddress (P.O. Box Number is Not Acceptable) | | |
| MARGATE FL 33063 | | | | 02 | Street Ad | idrass (F.O. Dox radinger is not wedeblable) | | |
| | MONIE PL 33003 | | | 83 | | | | |
| | | | | 1 | 0.0 | | 85 Zi | p Code |
| | | | | 84 | City | FL | _ 65 4' | p Code |
| office or r | egistered agent, or both, in the State m familiar with, and accept the oblig | of Florida, Such chan pations of, Section 607. | ge was authori; 0505, Florida S | red by latute | y the corpor s. | orporation submits this statement for the purpose or ration's board of directors. I hereby accept the ap | cointment | as registered |
| | Signature, typed or printed name of tegethered ap | | | | ent signature red | quired when reinstating) DATE | D DIDEOT | 000 111 40 |
| 12. | | ID DIRECTORS | 1: | | | ADDITIONS/CHANGES TO OFFICERS AN | Chang | |
| TITLE | D | DE | | TITLE | İ | | L. Grang | e Dividition |
| NAME | KOZAK, MORTON | | | NAME | | | | |
| STREET ADDRESS | 7761 HIGHLAND CIRCLE | | | | T ADDRESS | | | |
| CITY-ST-ZIP | MARGATE FL 33063 | F1 56 | | CITY- | ST-ZIP | | ☐ Chang | e Addition |
| TITLE | D | □ DE | | TITLE | 1 | | CHANG | e LI Addition |
| NAME | KOZAK, BRIGITTE | | | NAME | | | | |
| STREET ADORESS | 7761 HIGHLAND CIRCLE | | | | T ADDRESS | | | |
| CITY-ST-ZIP | MARGATE FL 33063 | DE | | | ST-ZIP | | Chano | e Addition |
| TITLE | | LJ DE | | TITLE | | | | |
| NAME | | | | NAME | | | | |
| STREET ADDRESS | | | | | T ADDRESS | | | |
| CITY - ST - ZIP | | DE | | | ST-ZIP | | Chang | e Addition |
| TITLE | | ل_ ا | | TITLE | . 1 | | Onerly | |
| NAME | | | | 2 NAME | | | | |
| STREET ADDRESS | | | | | T ADDRESS | | | |
| CITY-ST-ZIP | | DE | | I CITY-: | S1-ZIP | | Chang | e Addition |
| TITLE | | LJ 00 | | | | | | |
| NAME | | | | NAME | | | | |
| STREET ADDRESS | | | | | T ADDRESS | | | |
| CITY-ST-ZIP | | DE DE | | CITY- | ST-ZIP | | Chang | e |
| TITLE | | | | TITLE | | | CHAIR | |
| NAME | | | | ? NAME | | | | |
| STREET ADDRESS | | | | | T ADDRESS | | | |
| CITY-ST-ZIP | | | | | ST-ZIP | in Section 119.07(3Vi) Florida Statutes I further o | | th - Infana - + |
| | | | | | | | | |

4. 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 annual report or suppliemental 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 conformation 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 chapter 40, or on an attachment with an address.

SIGNATURE

11:50-50

345.5505