

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

30050796

DOCUMENT # P98000055349 1. Entity Name DELRAY OIL EXCHANGE, INC.					
Principal Place of Business 1601 W ATLANTIC AVE B1 DEERFIELD BEACH, FL 33442		Mailing Address BOX 5032 BOCA RATON, FL 33480			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0738334	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MOSCOSO, ERICK 1801 W. ATLANTIC AVE. #161 DELRAY BEACH, FL 33444			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature required when returning)</small>					
FILE NOW WITH FEES \$150.00 APRIL 15, 2003. Fees will be \$800.00 Money Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST MOSCOSO, ERICK 1801 W. ATLANTIC AVE #B1 DELRAY BEACH, FL 33444	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:		4/11/03		DATE	

CR2E034 (10/02)