

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 PM 1:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **S56383** (0)

**BEN RICH PETROLEUM PRODUCTS, INC.**

Principal Office Address: 1740 NW 105 AVE, PEMBROKE PINES FL 33026  
 Mailing Address: 1740 NW 105 AVE, PEMBROKE PINES FL 33026

DATE OF WHICH IT IS TO BE FILED

2. Filing Date of this Report	3a. Date of Last Report
05/28/1991	04/20/1994
4. FEI Number	Applied For / Not Applicable
65-0267587	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7. The corporation has liability for a delinquent tax under § 199.032, Florida Statute	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

21. Filing Date of this Report	26. Mailing Address
22. Filing Date of this Report	27. State, Apt. # etc
23. Filing Date of this Report	28. City & State
24. Filing Date of this Report	29. City & State
25. Filing Date of this Report	30. City & State

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HODGERS, BENJAMIN 1740 NW 105 AVE PEMBROKE PINES FL 33026	81. Name 82. Street Address (P.O. Box Number is Not Applicable) 83. 84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0105 and 607.1509, Florida Statute, the above named corporation solemnly declares the statement for the purpose of changing its registered office of principal office or both in the State of Florida such change was authorized by the corporation's board of directors, thereby accepting the appointment as registered agent. I am a director of the corporation and I am not the registered agent of the corporation.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME D PARKINSON, RICHARD E. 2425 KEY LARGO LN FT LAUDERDALE FL	13.1 NAME 13.2 STREET ADDRESS 13.3 CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12.2 NAME D HODGERS, BENJAMIN 1740 NW 105 AVE PEMBROKE PINES FL	13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12.3 NAME 12.4 STREET ADDRESS 12.5 CITY, STATE, ZIP	13.3 NAME 13.4 STREET ADDRESS 13.5 CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12.4 NAME 12.5 STREET ADDRESS 12.6 CITY, STATE, ZIP	13.4 NAME 13.5 STREET ADDRESS 13.6 CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12.5 NAME 12.6 STREET ADDRESS 12.7 CITY, STATE, ZIP	13.5 NAME 13.6 STREET ADDRESS 13.7 CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12.6 NAME 12.7 STREET ADDRESS 12.8 CITY, STATE, ZIP	13.6 NAME 13.7 STREET ADDRESS 13.8 CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12.7 NAME 12.8 STREET ADDRESS 12.9 CITY, STATE, ZIP	13.7 NAME 13.8 STREET ADDRESS 13.9 CITY, STATE, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption related to Sections 13.01 and 13.02, Florida Statute. I further certify that the information is true and correct as of the filing date of this report or supplemental annual report, true and correct as of the filing date, and that the corporation shall have the same as of the filing date and that the corporation is in compliance with the provisions of the Florida Statute and that the corporation is not delinquent in its tax obligations to the State of Florida.

SIGNATURE: *Benjamin Hodgers* BENJAMIN HODGERS 4/27/95 305-421-2611  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR