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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P97000082082 (3)

**FILED** Mar 16 1998 8:00am Secretary of State

1. Corporatio	GRESSIVE PETROLEUM UN	NLIMITED, INC.	(0)					
Principal Plac	e of Business	Mailing Address				C TO RESIDE LAND IN THE COURT OF STATE	)	INCOM THE INDO
	FEDERAL HWY. BEACH FL 33064-6513	4891 NO. FEDERAL HWY. POMPANO BEACH FL 33064-6513				, DO NOT WRITE IN TH	S SPACE	
						3. Date Incorporated or Qualified		
						09/22/1997		1
2 Principal P	Place of Business	2a, Mailing Address				4. FEI Number	I	pplied For
21	Total of Basilion	26				65-0783103	<del></del>	ot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc						Additional
22		27				5. Certificate of Status Desired		equired
City & State		City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip		ountry		8. This corporation owes or has paid the		
24	25	29	30			Personal Property Tax due June 30.		□ No
*41	g. Name and Address of Curre			$\neg$		10. Name and Address of New Registers		
	IODGERS, BRIAN A			81	Name			
	1740 N.W. 105 AVE.							
				82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
r	PEMBROKE PINES FL 33026			83	<b>_</b>			
				"				
				84	City	F	<b>65</b> Zip	Code
	TENET TVICTOR (A. A.) TURAN AV	80 TO 11 60 TO 10 TO		Į_	1,			
Office or t	registered agent, or both, in the State	e of Florida, Such channe i	vac author	ized b	v the comoral	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as	registered
agent la	im familiar with, and accept the oblig	gations of Section 607.050	5, Florida S	Statute	s.	,,		
SIGNATURE								
	Signature, typed or pointed name of registered in				ent signature requir	red when reinstating) DATE		
12.	<del></del>	VD DIRECTORS		3.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DP	DELETE		1 TITLE			L Change	Addition
name 1	HODGERS, BRIAN A		1.	2 NAME	Į			l
STREET ADDRESS	1740 N.W. 105 AVE.		. 1	3 STREET	T ADDRESS			į.
CITY-ST-ZIP	POMPANO BEACH FL 330			4 CITY-5	ST - Z(P			
TITLE	SD	DELETE	2.	1 TITLE			Change	Addition
NAME	HODGERS, BENJAMIN		2	2 NAME	ì			ì
STREET ADDRESS	1740 N.W. 105 AVE.		2	3 STREET	ADDRESS			ŀ
CITY - ST - ZIP	POMPANO BEACH FL 330	26	2	4 CITY-	ST-ZIP			
THLE		DELETE		1 TITLE			Change	Addition
NAME			3.	2 NAME				
STREET ADDRESS			3.	3 STREFT	ADDRESS			
CITY-ST-ZIP			ı	4. CITY-	l l			ſ
TITLE		DELETE		1 TITLE		19-14	Change	☐ Addition
NAME			4.	2 NAME			,	
STREET ADORESS			T T		ADORESS			ļ
				4 CITY-5	- 1			
CITY-ST-ZIP TITLE		DELETE		1 TITLE	11.64		Change	Addition
NAME		had settle		2 NAME	(			_
					ADDRESS			
STREET ADDRESS								
CITY-ST-ZIP		DELFTE		4 CITY - S	51 - ZIP		Change	Addition
TITLE		∟ nett it		1 TITLE	1		The Criticians	LI AUDRIUT
NAME				2 NAME				
STREET ADDRESS					ADDRESS			ŀ
CITY-SI-ZIP			6.	4 CITY-S	57-7IP			
14. I hereby o	certify that the information supplied v	with this filing does not qua	lity for the	exemp	ition stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the	information

indicated on this 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 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 attachment with an address.

2/25/98