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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 202929

1. Corporation Name

RADIANT OIL COMPANY OF TAMPA INC

Principal Plac	e of Business .	Mailing Address			
2004 DURHAM STREET 2004 DURHAM STREET P.O. BOX 5238 P.O. BOX 5238 TAMPA FL 33605 TAMPA FL 33605				DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualifed 05/27/1957	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-0803625	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	de	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year in	
24	25	293	0	Personal Property Tax.	☐Yes ☐No
	9. Name and Address of Cur	rent Registered Agent	lail	10. Name and Address of New Registered	Agent
CAD	ITANO,NICK		81 Name		
2004 DURHAM ST			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	PA FL 33605		83		
••••			03		
			84 City	FI.	85 Zip Code
44 Durauant	to the provisions of Sections 607.0	502 and 607 1508 Florida Statutes	the above-named cor	moration submits this statement for the purpose of	f changing its registered
office or i	registered agent, or both, in the Sta	ate of Florida. Such change was auti	nonzed by the corboral	tion's board of directors. I hereby accept the appo	intment as registered
agent. I a	am familiar with, and accept the obl	igations of, Section 607.0505, Florid	la Statutes.		
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOTE: Ro	egistered Agent signature requir	red when reinstating) DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CAPITANO,NICK		1.2 NAME		
STREET ADDRESS	602-CAROLYN DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CAPITANO,ANGELINA		2.2 NAME		
STREET ADDRESS	602-CAROLYN DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		2.4 CITY-ST-ZIP		C Change C Addition
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition
NAME	CAPITANO, JOSEPH		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	Ļ	☐ DELETE	4.1 TITLE		
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TITLE			5.1 MILE 5.2 NAME		
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE			6.2 NAME		-
NAME	.1		6.3 STREET ADDRESS		
STREET ADDRESS					

14. 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 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 seceiver 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 on an attachment with an address, with all other like empowered. MANURE REQUIRED

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90245 050 ***158.75

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