2004 FOR PROFIT CORPORATION ANNUAL REPORT

| ANNUAL REPORT | | | | | | | |
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| DOCUMENT # 238932 1. Entity Name | | | | FILED | | | |
| | ASTERN PETROLEUM CORP. | | | | 16 AH10: L | | |
| Principal Place 10400 GRIFF COOPER CITY | FIN RD #210 | Mailing Address 10400 GRIFFIN RD #210 COOPER CITY, FL 33328 | | Sit. Militari | STATE | E)A | |
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| - | | | | | 27211 DIEN EIEN EIEN | | |
| DO NOT WRITE IN THIS SPACE | | | CE | 03042004 4. FEI Numb | No Chg-P | CR2E034 (1 | 0/03) Applied For |
| | | | | 59-105 | 0673 | □ \$8.7 | Not Applicable 5 Additional |
| | 6 Name and Address of Current Re | · - | 5. Certificate | of Status Desired | | lequired | |
| 6. Name and Address of Current Registered Agent | | | | | | | |
| 10400 GRI | | DO NOT WRITE | | | | | |
| SUITE 210 COOPER CITY, FL 33328 | | | IN THIS SPACE | | | | |
| 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Output Description of the control of the con | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. | | | | .00 May Be led to Fees | | | / |
| 10. | OFFICERS AND D | RECTORS | I | | <u> </u> | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P WILLIAMSON, ROBERT 10400 GRIFFIN RD ST 1B21 COOPER CITY, FL 00000, | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | 03/I: | 000305 6/0401124 | 59142 003 ** | :2 :150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT W | RITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN ' | THIS SF | ACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| 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 a statechment with an address, with all other like empowered. | | | | | | | |