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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # F95000003496 (5)

PETRACOM HOLDINGS, INC.

Principal Place of Business	Mailing Address
1527 NORTH DALE MABRY HIGHWAY, STE. 105	1527 NORTH DALE MABRY HIGHWAY, STE. 105

## **FILED** Jan 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

City & State 28
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   S. Certificate of Status Desired   \$8.75 Additional Foe Required City & State   Country   Zip   Country   S. This corporation owes or has paid the current year Intensible Personal Property Tax due June 30. XX fee   No   No   No   No   No   No   No
City & State  Country  Zip  Country  Zip  Country  Zip  Country  B. This corporation owes or has paid the current year Intangible Personal Property law due June 30. XX ves No.  Name and Address of Current Registered Agent  C T CORPORATION SYSTEM  1200 SOUTH PINE ISLAND ROAD  PLANTATION FL 33324  CT CORPORATION SYSTEM  1200 SOUTH PINE ISLAND ROAD  PLANTATION FL 33324  Suite 105  Sa City  Tutz  FL S Street Address (P.) Box Number is Not Acceptable)  15.27 North Dale Mabry Highway  Sa City  Lutz  FL S Street Address (P.) Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment
City & State  Country  Country  Added to Fees  Added to Fees  Added to Fees  Responsal Property Tax due June 30. K XEVS No No  9. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM  1200 SOUTH PINE ISLAND ROAD  PLANTATION FL 33324  Responsal Property Tax due June 30. K XEVS No No  1200 SOUTH PINE ISLAND ROAD  PLANTATION FL 33324  Responsal Property Tax due June 30. K XEVS No No  Street Address (P.O. Box Number is Not Acceptable)  15.27 North Dale Mabry Highway  Responsal Property As the statement for the purpose of changing its registered agent.  The pursuant to the provisions of Sections 607.0502 and 607.1508. Fibrida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fibrida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Fibrida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Fibrida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with. and accept the appointment as registered agent. I am familiar with. and accept the appointment as registered agent. I am familiar with. An appointment as registered agent. I am familiar with. An appointment as registered agent. I am familiar with. An appointment as registered agent. I am familiar with. An appointment as registered agent. I am familiar with. An appointment as registered agent. I am familiar with. An appointment as registered agent. I am familiar with. An a
Zip   Zip   Country   Zip   Country   B. This corporation were or has paid the current year intendible Personal Property Tax due June 30.   Xives   No
Zip   Zip   Zip   Zip   Zip   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   Personal Property Tax due June 30.   XX Yes   No   No   No   No   No   No   No   N
24 25 25 29 30 Personal Property Tax due June 30. XX fee  No  9. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  1527 North Dale Mabry Highway  1528 Street Address (P.O. Box Number is Not Acceptable) 1527 North Dale Mabry Highway  1529 Street Address (P.O. Box Number is Not Acceptable) 1527 North Dale Mabry Highway  1528 Street Address (P.O. Box Number is Not Acceptable) 1527 North Dale Mabry Highway  1529 Street Address (P.O. Box Number is Not Acceptable) 1527 North Dale Mabry Highway  1529 Street Address (P.O. Box Number is Not Acceptable) 1527 North Dale Mabry Highway  1520 South I are mail and with a number of the purpose of changing its registered agent. I are familiar with. and accept the obligations of Section 607.0505, Florida Statutes, the above-amend carporation submits this statement for the purpose of changing its registered agent. I are familiar with. and accept the obligations of Section 607.0505, Florida Statutes  SIGNATURE  Signature. Section Section 607.0502 and 507.1508, Florida Statutes, the above-amend carporation submits this statement for the purpose of changing its registered agent. I are familiar with. and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  Signature. Section Section 607.0502 and 507.1508, Florida Statutes. The corporation's board of directors. I hereby accept the appointment as registered agent ag
9. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  Solution  12
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324    Sureet Address (P.O. Box Number is Not Acceptable)   1527 North Dale Mabry Highway
12.00 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  12.00 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  13.20 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  14.22 Suite 105  15.27 North Dale Mabry Highway  15.21 Lutz  15.27 North Dale Mabry Highway  15.22 Street Address (F.O. Box Number is Not Acceptable)  15.27 North Dale Mabry Highway  15.24 City  15.25 Lutz  15.25 Lut
PLANTATION FL 33324    82   Street Address (P.O. Box Number is Not Acceptable)   1527 North Dale Mabry Highway   1527 North Da
PLANTATION FL 33324    Suite 105
SIGNATURE  DP  DELETE  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent to the purpose of changing its registered agent
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abovenamed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approintment as registered agent. I arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature. Thead or hymido name of repulsations agent and their applications. I hereby accept the approintment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of change its registered agent, or board of directors. I hereby accept the purpose of change its registered agent, or board of directors. I hereby accept the purpose of change its registered agent, or board of directors. I hereby accept the purpose of change its registered agent, or board of directors. I hereby accept the purpose of the purpose agent and the spatial statutes.  12.
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SIGNATURE  Signature. Thed or increase name of registerity agent and interf application. In Interference of Agent Signature required when reinstailing)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DP  ASH, HENRY A  STREET ADDRESS  CITY-ST-ZIP  LUTZ FL 33549  14. CITY-ST-ZIP  LUTZ FL 33549  TRICKEY, HOWARD  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  LUTZ FL 33549  12. NAME  12. NAME  14. CITY-ST-ZIP  LUTZ FL 33549  14. CITY-ST-ZIP  LUTZ FL 33549  15. Change Addition  Addition  Change Addition  22. NAME  23. STREET ADDRESS  CITY-ST-ZIP  LUTZ FL 33549  24. CITY-ST-ZIP  TITLE  VT  NAME  FRY, JOSEPH  STREET ADDRESS  1527 NORTH DALE MABRY HIGHWAY, STE. 105  31. TITLE  22. NAME  32. NAME  32. NAME  STREET ADDRESS  CITY-ST-ZIP  LUTZ FL 33549  34. CITY-ST-ZIP  LUTZ FL 33549  34. CITY-ST-ZIP  LUTZ FL 33549  Addition  Change Addition  Change Addition  Addition  Change Addition  Change Addition  Change Addition  Change Addition
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NAME 62 NAME
STREET ADDRESS 6.3 STREET ADDRESS
City-St-ZIP 6.4 City-ST-ZIP

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.

SIGNATURE: