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PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700006675 (9)

OILS UNLIMITED INC

THE REAL PROPERTY.

NAME

STREET ADDRESS CITY-ST-ZIP

Principal Place of Business Mailing Address

1230 E. 30TH STREET SANFORD AIRPORT 1220 E. 30TH STREET SANFORD AIRPORT SANFORD FL 32773 SANFORD FL 32773

FILED Apr 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1997 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 63-1090023 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PATTERSON, WILLIAM Name 1220 E 30TH STREET SANFORD AIRPORT 82 Street Address (P.O. Box Number is Not Acceptable) SANFORD FL 32773 83 84 City 85 Zip Code dutes, the above-named corporation submits this statement for the purpose of changing its registered was authorized by the perporation's board of directors. I hereby accept the appointment as registered 11. Pursuant to the provisions of Sc office or registered agent, or agent. I am familia with **SIGNATURE** INOTE Registered Ag OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSTD DELETE Change TITLE 1.1 TITLE PATTERSON, WILLIAM P NAME 1.2 NAME 1220 E 30TH STREET SANFORD AIRPORT STREET ADDRESS 1.3 STREET ADDRESS **SANFORD FL** CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME **2.2 NAME** STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CHY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CiTY - ST - ZiP ☐ Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition TITLE 6.) TITLE

14. Thereby certify that the information supplied with this filing coes 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 receiver of used empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change of the corporation of the corporatio

6.4 CHTY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS