2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

F9900002530

1. Entity Name

PETROLEUM REALTY CORPORATION



FILED Feb 03, 2003 8:00 am Secretary of State 02-03-2003 90057 014 ***150.00

GO WE TO

1200 BRICKELL AVE., STE 1500				Mailing Address 1200 BRICKELL AVE STE 1500 MIAMI FL 33131									
2. Principal P	lace of Busin	ess	3. Ma	iling Address					4119 (1111 1111 1111 1111 1111 1111 1111	I Baill Baill a	8114 B.BATT	14001 0 140	O 1714) EBTI (BBI
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State				City & State				4. FEI Number 31-1643024				\rightarrow	plied For
Zip Country			Zip	Zip Cou			5.	5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6. Name	and Address of Current	Register	Registered Agent			7. Name and Address of New Registered Agent						
					· · · ·	Name							
		VICE COMPANY		Street Ar			dress (P.O. Box Number is Not Acceptable)						
	YS STREET	0004 0505											
IALLAMA	SSEE FL 3	2301-2525											
						City				F	•L ²	Zip Cod	e
	named entity ions of regist	y submits this statement fo ered agent.	or the purp	oose of changing its	registere	ed office or	registered aq	gent, or both,	in the State of I	Florida. I a	am famili	iar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if ap	olicable. (NOTE	: Registere	d Agent signatur	e required when	reinstating)		DAT	<u>-</u>		
After	May 1, 200	! FEE IS \$150.00 I3 Fee will be \$550.00 Florida Department of	f State						ion Campaign f Fund Contribut	-			0 May Be I to Fees
10.		OFFICERS AND	DIRECTO	1	11.		Ai	 DDITIONS/C	HANGES TO O	FFICERS A	ND DIR	ECTOR	S IN 11
TITLE	VCD	0.0440		☐ Delete	TITLE				<u>, </u>			Change	☐ Addition
NAME STREET ADDRESS	GLIMCHER, DAVID 88 WEST MAIN STREET				NAMI	ET ADDRESS							
CITY-ST-ZIP	COLUMBUS OH 43215			CITY									
TITLE	PDCC		•	☐ Delete	TITLE		_ _					Change	☐ Addition
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STREET ADDRESS CITY-ST-ZIP						ET ADDRESS ST-ZIP							\
TITLE	D	2		☐ Delete	TITLE							Change	Addition
NAME	AZOR, BE	TH		Doloic	NAMI								
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CITY-ST-ZIP	MIAMI FL	33131				ST-ZIP						01	
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CITY-ST-ZIP	MIAMI FL	33131			CITY-	ST-ZIP							
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NAME STREET ADDRESS					NAME STREE	ET ADDRESS							ļ
CITY-ST-ZIP						ST-ZIP							
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NAME	1				NAME	:					_		
STREET ADDRESS						ET ADDRESS							1
CITY-ST-ZIP	ertify that the	information supplied with	this filing	does not qualify for		ST-ZIP	d in Section	119 07/3///	Florida Statutor	1 further	certify +	nat the i	oformation

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 an attachment with an address, with all other like empowered.

SIGNATURE:

