2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G28123

1. Entity Name

ED WATTS PETROLEUM EQUIPMENT MAINTENANCE, INC.



FILED Jan 11, 2007 08:00 AM Secretary of State

Fee Required

Principal Place of Business

%EDWARD S. WATTS, III P.O. BOX 2413 KEY WEST, FL 33045 Mailing Address

%EDWARD S. WATTS, III P.O. BOX 2413 KEY WEST, FL 33045



DO NOT WRITE IN THIS SPACE

01042007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 59-2269216 Not Applicable

5. Certificate of Status Desired \$8.75 Additional

6. Name and Address of Current Registered Agent

WATTS, EDWARD S., III 3333 DUCK AVE. APT. B211 KEY WEST, FL 33040

DO NOT WRITE 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 agent and extend the interest agent and agent and title if applicable.					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent asynature required when reinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	l l		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST WATTS, EDWARD S., III 3333 DUCK AVE APT B-211 KEY WEST, FL 33040				·
TITLE NAME STREET ADDRESS CITY-ST-ZIP					000000582577 01/11/07-80037-009 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			IN T	THIS SPACE
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 exemptions contained in Chapter 119, 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 an attachment with an address, with all other like empowered.					