2002 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

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of the corporation or the receiver or trustee emple

May 15, 2002 8:00 am § Secretary of State H13927 DOCUMENT # 1. Entity Name 05-15-2002 90126 027 ***150.00 INTERNATIONAL PETROLEUM CORPORATION Principal Place of Business Mailing Address 105 S. ALEXANDER STREET 105 S. ALEXANDER STREET PLANT CITY FL 33566 PLANT CITY FL 33566 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2459425 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD PLANTATION FL 33324 City Zip Code 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE (\$ \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. П Added to Fees ₹(See criteria on back) Make Check Payable to Department of State 41. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition HABETS, HARRY NAME NAME 14901 QUORUM DR., STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS TX 75254 CITY-ST-ZIP TITLE **VD** ☐ Delete TITLE ☐ Change ☐ Addition NAMÉ SOLOMON, BILL W NAME STREET ADDRESS 14901 QUORUM DR., STE 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75254 ~ ☐ · Change Addition TITLE Delete TITI F NAME SELF, DAN NAME STREET ADORESS STREET ADDRESS 14901 QUORUM DR., STE 200 CITY-ST-7IP CITY-ST-7IP DALLAS TX 75254 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director weren to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with

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