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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # H61211

1. Corporation Name

A. & J. FUEL OIL, CO.

Principal Place	e of Business	Mailing Address		I JEBINIC BILL BILL BILL INDIA HOLD INDIA HOLD INDIA	i elėli titli eleli titli eleli eleli
% FELIX M. CANNELLA. JR. 4725 MICHAEL COURT. UNIT 128 TAMPA FL 33614		% FELIX M. CANNELLA. JR. 4725 MICHAEL COURT. UNIT 128 TAMPA FL 33614		DO NOT WRITE IN THI	S SPACE
	•			3. Date Incorporated or Qualifed 06/10/1985	
2 Principal D	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
_ `	lace of business	26		59-2547180	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.	_		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year !	ntangible
24	25	29 30		Personal Property Tax.	∐Yes ⊠No
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registere	d Agent
CANNELLA, FELIX M., JR. 4725 MICHAEL COURT UNIT 128 TAMPA FL 33614			82 Street Addr	CLIX M CANNELLA ress (P.O. Box Number is Not Acceptable) 17 RIVER SIDE DR	25
173141	(A 12 00017		84 City	nea F	85 Zip Code 3360 乙
office or r agent. I a SIGNATURE	egistered agent, or both, in the State of m familiar with, and accept the obligated from the state of the sta	of Florida, Such change was authorions of Section 607.0505, Florida Resident (NOTE: Reg	orized by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appoint of the purpose of the purp	.÷
12.	OFFICERS AN	D DIRECTORS DELETE	1.1 TITLE	ADDITIONS/CIANGES TO GITTOERS	☐ Change ☐ Addition
	PD Cannella, Felix M., Jr.	El becele	1.2 NAME		
NAME OTRECT ADODESES	4725 MICHAEL COURT		1.3 STREET ADDRESS	.•	Ì
STREET ADORESS	TAMPA FL		1.4 CITY-ST-ZIP		
CITY-ST-ZIP	(AMICA CL	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME	'	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP	•	
TITLE "		DELETE	3.1 TITLE	- Care	☐ Change ☐ Addition
NAME i	}		3.2 NAME		}
STREET ADDRESS		1	3.3 STREET ADDRESS		Ì
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZiP		
TITLE		□ DELETE	6.1 TITLE		☐ Change ☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does 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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90010 001 ***150.00

. : PRINTER BUILD BUILD HERD HERD HERD HERD BUILD BUIL