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

PROFIT CCRPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Kather ne Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90037 038 ***150.00

DOCUMENT # **K84960**

1. Corporation Name

DOPRA PETRO MINING, INC.

Principal Place of Business		Maining Address						
2301 COLLINS AVE								
M-25 MIAMI BEACH FL 33139	M-25 ACH FL 33139 MIAMI BEACH FL 33139			DOI	DO NOT WRITE IN THIS SPACE			
US US MIAMI BEACH FL 33139 MIAMI BEACH FL 33139				3. Date Incorporated or	Qualifed			
					05/01/1989			
2. Principal Place of Business		2a. Mailing Address			4. FEI Nu nber		X Ap	plied For
21 8514 NORTHWEST	66 ST	26 8514 NO	RTHWE	ST 66	ST 65-0115728	<u> </u>		t Applicable
Suite, Art. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status D	Desired	\$8.75 A	
NONE NONE		27 NONE			-			-'
City & State MIAMI, FLORID	3	City & State 28 MIAMI, F'LORIDA				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip Cour		Zip	Cou		8. This corporation owe			01003
	.s.A.	33166		S.A.	Person al Property Ta	•	Yes	[¶No
		Registered Agent	1001		10. Name and Address		: I Agent	
				81 Name	PRADO, JOSE A	ā		
PFADO, JOSE A.				82 Street A	Street Address (P.O. Box Number is Not Acceptable)			
13420 SW 50 ST								
MIAMI FL 33175				83	17860 SOUTHWE	ST 168 S	TREET	
				84 City	MIAMI,		L 85 Zip 6	Code_
11. Pursuant to the provisions of So				'	•	<u></u>		
office or registered agent or bo agent. I am familiar with amaga SIGNATURE	4XJOSE	A. PRADO/PR	ESIDE	NT	u red when reinstating)	APR	IL 20TH	<u>1,19</u> 99
12.	OFFICERS AND		13.	-	ADDITIC NS/CHANGE	S TO OFFICERS	AND DIRECTO	
TITLE / PD		☐ DELETE	1.1 TIT	LE	₽D		Thange	Addition
NAME // PRADO, JOSE A.			1.2 NA	ME	PRADO, JOSE A	•		
STREET ADDIES 13420 SW 50 ST			1.3 ST	REET ADDRESS	17860 SW 168			
CITY-ST-				Y-ST-ZIP	MIAMI, FL 331	8 /		— — Addisin
TITLE		☐ DELETE	2.1 TIT				Change	Addition
NAME			2.2 NA					
STREET ADDRE 3S.			1	REET ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE	2. 4 CI	TY-ST-ZIP			Change	Addition
NAME			3.2 NA				_ ,	_
STREET ADDRE 3S								
CITY-ST-ZIP			8	REET ADDRESS				
TITLE			3.3 ST	REET ADDRESS				
		☐ D€LETE	3.3 ST	TY-ST-ZIP			☐ Change	☐ Addition
NAME		☐ DELETE	3.3 ST 3.4. CI	TY-ST-ZIP LE			☐ Change	Addition
NAME STREET ADDRE 3S		☐ D£LETE	3.3 ST 3.4. CI 4.1 TD 4. 2 N	TY-ST-ZIP LE			Change	Addition
			3.3 ST 3.4. CI 4.1 TH 4. 2 NJ 4.3 ST	TY-ST-ZIP LE NME				
STREET ADORE 'S		☐ DELETE	3.3 ST 3.4. CI 4.1 TN 4.2 N/ 4.3 ST 4.4 CF 5.1 TN	TY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE			☐ Change	
STREET ADDRE SS CITY-ST-ZIP			3.3 ST 3.4. CI 4.1 TII 4. 2 N/ 4.3 ST 4.4 CF 5.1 TII 5.2 NA	TY-ST-ZIP LE JME REET ADDRESS Y-ST-ZIP LE ME				
STREET ADORE 3S CITY-ST-ZIP TITLE			3.3 ST 3.4. CI 4.1 TH 4.2 NA 4.3 ST 4.4 CF 5.1 TH 5.2 NA 5.3 ST	TY-ST-ZIP LE LE LE LE LE LE LE LE LE L				Addition
STREET ADORE SS CITY-ST-ZIP TITLE NAME			3.3 ST 3.4. CI 4.1 TH 4.2 NA 4.3 ST 4.4 CF 5.1 TH 5.2 NA 5.3 ST	TY-ST-ZIP LE LE REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-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 innual 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 on 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 an an attachment with an address, with all other like empowered.

6.2 NAME

63 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

> -/JOSE A. PRADO OFFICER OR DIRECTOR

APRIL 20TH, 1999. 305-5939922

Daytime Phone #