
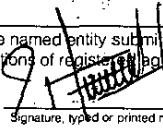
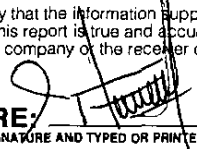


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90020 027 ****50.00

DOCUMENT #L03000008852 1. Entity Name PETROLEUM INDUSTRY SUPPLY L.L.C.					
Principal Place of Business 7925 NW 12 STREET STE. 318 MIAMI, FL 33126			Mailing Address 7925 NW 12 STREET STE. 318 MIAMI, FL 33126		
2. Principal Place of Business 1241 MAJESTY TERRACE Suite, Apt. #, etc.			3. Mailing Address 1241 MAJESTY TERRACE Suite, Apt. #, etc.		
City & State WESTON, FLORIDA			City & State WESTON, FLORIDA		
Zip 33327		Country USA		4. FEI Number A/F	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent FERRETTI, PEDRO 7925 NW 12 STREET STE. 318 MIAMI, FL 33126					
7. Name and Address of New Registered Agent Name PEDRO FERRETTI Street Address (P.O. Box Number is Not Acceptable) 1241 MAJESTY TERRACE City WESTON FL Zip Code 33327					
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  DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2004			Make check payable to Florida Department of State		
9. MANAGING MEMBERS / MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FERRETTI, PEDRO <input type="checkbox"/> Delete 7925 NW 12 STREET STE. 318 MIAMI, FL 33126				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PEDRO FERRETTI 1241 MAJESTY TERRACE WESTON, FL 33327				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BRENDA MARIELA LADD 1241 MAJESTY TERRACE WESTON, FL 33327				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Date _____ Daytime Phone # _____					

24064824



04222004 Chg-LLC CR2E083 (10/03)