UNIFORM BUSINESS REPORT (UBR)

DOO@MENT # L03000031366					/		
1. Entity Name							res-
Fuel Imports, LLC					U4 AP	R-9 PMI	2: 45
					_SECRE	TARY OF S ASSEE, FLI	~
Principal Place of Business Mailing Address					TALLAH,	ASSEF FL	IATE
10119 Queens Park Drive 10119 Queens I			rk Drive				AKIDA
Tamps, FL 33647 Tamps, FL 33647				\wedge			
2. Principal Plac	3 Mailing Address			141			
10119 Queens Park Drive		10119 Queens Pa	uk Drive				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			100032770591 04/14/04-01071002 **50.		
City & State		City & State			4. FEI Number	X	Applied For
Tampa, FL		Tampa, FL			applied for		Not Applicable
Zip 33647	County	Zip 33647	County		5. Certificate of Status		5.00 Additional
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent/Office				
				Name			
Corporate Creations Network Inc.				Street Address (P.O. Box Number is Not Acceptable)			
11380 Prosperity Farms Road #221E Palm Beach Gardens, FL 33410				Suite, Apt. #, ex.			
rum beach Gardens, FL 35410							
				City Zip Code			
	ned equity submits this s	tatement for the p	urpose of c	hanging its rep	gistered office or registe	red agent, or bo	th, in the State of
Florida.	80h/9Hr.				Λ	Chro	
SIGNATURE	tree Agent Accepting Appointment	awn S. Stoutt, Assists (NOTE: Resistend Ass		wind whee reinstate	DATE	tola (-	
			NOW II	FEE IS \$5 to Departmen	0.00		
O MANAGING M	EMBERS/MEMBERS		* XXX	1.2	3-400 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		·
TITLE	MOR P		DELBTE		N/CHANGES		CHANGE
NAME STREET ADDRESS CITY - ST - ZIP	Ranya Tahoun 10)19 Queens Park Drive Tampa, FL 33647	-		NAME STREET ADD CITY - ST - Z			☐ ADDITION
TITLE	S. T		DELETE	TITLE			CHANGE
NAME STREET ADDRESS CITY - ST - ZIP	Mohamed Tahoun 10119 Queens Park Drive Tampa, FL 33647	•		NAME STREET ADD CITY - ST - Z	DRESS	~ .	ADDITION
TITLE	VP		DELETE				CHANGE
NAME STREET ADDRESS CITY - ST - ZIP	Michael H. Issa 10119 Queens Park Drive Tampa, FL 33647			NAME STREET ADD CITY - ST - Z		***	ADDITION
TITLE			DBLETE	TITLE			CHANGE
NAME STREET ADDRESS CITY - ST - ZIP	,			NAME STREET ADD CITY - ST - Z	PRESS		ADDITION
TITLE]	DELETE	TITLE			CHANGE
NAME STREET ADDRESS CITY - ST - ZIP	•		`	NAME STREET ADD CITY - ST - Z			ADDITION
11. I hereby certify	that the information supplied indicated on this report is tr	d with this filing doe	s not qualify	for the exemplic	on stated in Section 119.076	3)(i). Fiorida Stati	uies. I further certify
member of manager	of the limited liability comp	any or the receiver or	r trustee emp	owered to execut	to this report as required by	Chapter 608, Flor	ida Statutes.
SIGNATURE.		hour	Ran	ya Tahoun, Presi	dent April 5, 200		<u>)592-224/</u>
	SIGNATURE AND TYPED OR PRI	OVEMBIE TO SMAN CETY	MANAGING M	EMBER OR MANAG	ER /	Data	Daytiene Phone