

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 30, 2006 08:00 AM
Secretary of State

DOCUMENT #	L03000047308
1. Entity Name	
Trishual Petroleum LLC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
4460 McIntosh Road			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Dover, FL			
Zip	Country	Zip	Country
33527			

DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For	
20-0433307		<input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name	
KESARWANI, ANIL	
Street Address (P.O. Box Number is Not Acceptable)	
4460 MCINTOSH RD	
City	Zip Code
Dover	FL 33527

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE**

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	MGR
NAME	Anil Kesarwani
STREET ADDRESS	4460 MCINTOSH RD
CITY-ST-ZIP	Dover, FL - 33527
TITLE	MGR
NAME	Kumar, Rajinder
STREET ADDRESS	4460, McIntosh road
CITY-ST-ZIP	Dover, FL - 33527
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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11.

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Anil Kesarwani **ANIL KESARWANI**

3/27/06

Date

813-598-2207

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR