2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT. # L04000052388

1. Entity Name

SR PETROLEUM, LLC

FILED Apr 14, 2008 08:00 A Secretary of State

Principal Place of Business 1231 W. COPANS ROAD POMPANO BEACH, FL 33069 Mailing Address
1301 SW 2ND ST

POMPANO BEACH, FL 33069



DO NOT WRITE IN THIS SPACE

04092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2159665 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HRENICK, ANDREW 1301 SW 2ND ST POMPANO BEACH, FL 33069

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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

CITY-ST-7IP

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOWI!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	HRENICK, ANDREW
STREET ADDRESS	1301 SW 2ND ST
C/TY-ST-ZIP	POMPANO BEACH, FL 33069
TITLE	MGRM
NAME	HRENCIK, STEVEN
STREET ADDRESS	7931 REDWOOD LANE
CITY-ST-ZIP	POMPANO BEACH, FL 33067
TITLE	MGRM
NAME	HRENICK, DAVID
STREET ADDRESS	7931 REDWOOD LANE
CITY-ST-ZIP	POMPANO BEACH, FL 33067
TITLE	MGRM
NAME	HRENICK, MICHAEL
STREET ADDRESS	7931 REDWOOD LANE
CITY-ST-ZIP	POMPANO BEACH, FL 33067
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 of the receiver or trustee explowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: When Klund AMENICIC 4-10.08 954-401 1764

Date

Daytime Phone #