

FROM :

FAX NO. :

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90064 020 \*\*\*\*50.00

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                                                                                                                         |                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # L05000011455</b><br>1. Entity Name<br><b>FLABAMA PETRO, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 |                                                        |                                                                   |
| Principal Place of Business<br><b>210 LOCK ROAD<br/>         DEERFIELD, FL 33442 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 | Mailing Address<br><b>210 LOCK ROAD<br/>         DEERFIELD, FL 33442 US</b>                                                             |                                                                   |
| 2. Principal Place of Business<br><b>210 Lock Road</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 | 3. Mailing Address<br><b>210 Lock Rd.</b>                                                                                               |                                                                   |
| Suite, Apt. #, etc.<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 | Suite, Apt. #, etc.<br>                                                                                                                 |                                                                   |
| City & State<br><b>Deerfield Beach, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | City & State<br><b>Deerfield Beach, FL</b>                                                                                              |                                                                   |
| Zip<br><b>33442</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | Zip<br><b>33442</b>                                                                                                                     |                                                                   |
| Country<br><b>USA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | Country<br><b>USA</b>                                                                                                                   |                                                                   |
| 4. FEI Number<br><b>42-1663072</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 | Applied For<br><input type="checkbox"/> Not Applicable                                                                                  |                                                                   |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                 | <b>\$5.00</b> Additional Fee Required                                                                                                   |                                                                   |
| 6. Name and Address of Current Registered Agent<br><b>Manzurul Islam<br/>         210 Lock Road,<br/>         Deerfield Beach, FL 33442.</b>                                                                                                                                                                                                                                                                                                                                                             |                                 | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> Zip Code |                                                                   |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-electing)</small>                                                                                                                                                                                                                                                                                                                             |                                 |                                                                                                                                         |                                                                   |
| <b>Filing Fee is \$50.00<br/>         Due by May 1, 2006</b>                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 |                                                     |                                                                   |
| <b>9. MANAGING MEMBERS/MANAGERS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | <b>10. ADDITIONS/CHANGES</b>                                                                                                            |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP<br><b>Manzurul Islam MMR<br/>         210 Lock Road,<br/>         Deerfield Beach, FL 33442</b>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>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 exemptions contained in Chapter 115, 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. |                                 |                                                                                                                                         |                                                                   |
| <b>SIGNATURE:</b>                                                                                                                                                                                                                                                                                                                                                                                                     |                                 | <b>4-27-06</b>                                                                                                                          |                                                                   |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>                                                                                                                                                                                                                                                                                                                                                                                     |                                 | <small>Date</small>                                                                                                                     |                                                                   |