## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

BAS OIL, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M04131

(2)

**FILED** Jan 28 1997 8:00am Secretary of State



Principal Place of Business Mailing Address  8991 MIAMI LAKES WAY 6991 MIAMI LAKES FL 33014 MIAMI LAKES FL 3						
					3. Date Incorporated or Qualifier 08/17/1984	d 3a. Date of Last Report 03/21/1996
	ace of Business	2a. Mailing Address			4. FEI Number 59-2493607	Applied For
Suite, Apt	#, etc	Suite, Apt #, etc.	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	\$8.75 Additional
22 City & Statu		Cily & State		<del></del>	. '>	Fee Required
23	·	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip <b>24</b>	Country 25	Z(p <b>29</b> ]	Goul 30	ntry	This corporation has liability for Florida Statutes	or intangible tax under s. 199.032,  Yes No
24	9. Name and Address of Currer		[30]		10. Name and Address of New	
PER	EZ, BASILIO			81 Name		
6991 MIAMI LAKES WAY				82 Street A	ddress (P.O. Box Number is Not Accep	table)
MIAI	MI LAKES FL 33014			83	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
			Į	03	_	
			[	84 City		FL 85 Zip Code
Affice or n	to the provisions of Sections 607 050 egistered agent, or both, in the State in familiar with, and accept the oblig has about free or poor fire of the stated by	of Florida Such change wa ations of, Section 607.0505,	s authorized Florida State	l by the corpo utes.	orporation submits this statement for the ration's board of directors. I hereby acceptance squired when reinstating)	e purpose of changing its registered cept the appointment as registered
12.		D DIRECTORS	13.	Age it signature in		FICERS AND DIRECTORS IN 12
1ReF	PD	DELETE	11707	LE		Change Addition
NAME	PEREZ, BASILIO		1 2 NA	ME		
STREET ADDRESS	6991 MIAMI LAKES WAY MIAMI LAKES FL		1	REET ADDRESS		
Dity-S1-7 P	MIMMI LANES FL	DELE1E	1.4 CF 2.1 TiT	Y-ST-ZIP		Change Addition
NAME		La becere	2 2 NA	Į.		
STEET ADORESS (			2.3 ST	REET ADDRESS		
Cith ST ZIP			2 4 CI	TY - ST - ZIP		
TITLE		☐ DELETE	3.1 10	1		Change Addition
NAME			3.2 NA	Į.		
STREET ADDRESS COTY-ST-ZOP			- 6	REET ADDRESS TY-ST-ZIP		
TITLE		DELETE	4.1 111			☐ Change ☐ Addition
NAME			4. 2 N	AME		
STREET ADDRESS			4.3 ST	reet address		
CHY-ST-ZIF				Y-ST-ZIP		
THTLE		☐ DELETE	5.1 7/1	1		Change Addition
NAM:			5.2 NA			
STREET ADDRESS				REET ADDRESS TY-ST-ZIP		
CITY - ST - 7IFF		DELETE	6.4 (J			Change Addition
NAME			62N/			
STREET ADDRESS	 			REET ADDRESS		
CITY - ST - ZW:			6.4 CI	TY-ST-ZIP		

14. I do hereby cert fy 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 annual report or supplemental annual 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 Brock 12 or Block 13 if changed, or on an attack method with an address.