2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 07, 2002 8:00 am & Secretary of State DOCUMENT # P00000068829 1. Entity Name CONCORDE PETROLEUM ENTERPRISES INC. 05-07-2002 90358 027 ***150.00 Principal Place of Business Mailing Address 8800 S.W. 104TH ST. 8800 S.W. 104TH ST. KAOCOUNH **MIAMI FL 33176 MIAMI FL 33176** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1033146 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PEQUENO, MILADY Street Address (P.O. Box Number is Not Acceptable) 8800 S.W. 104TH ST. MIAMI FL 33176 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition PEQUENO, TOMAS NAME NAME STREET ADDRESS 8800 S.W. 104TH ST. STREET ADDRESS CITY-ST-ZIP MIAMI FL 33176 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME PEQUENO, GLADYS NAME STREET ADDRESS 8800 S.W. 104TH ST. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33176** CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition NAME PEQUENO, MILADY NAME STREET ADDRESS 8800 S.W. 104TH ST. STREET ADDRESS CITY-ST-ZIF MIAMI FL 33176 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if

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