2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2004
Secretary of State

DOCUMENT# P00000071606

Entity Name: EWING OIL III, INC.

Current Principal Place of Business:

6405 NW 36 STREET SUITE 117
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

6405 NW 36 STREET SUITE 117
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-1027855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPOTE, RICHARD
1280 RAVEN AVENUE
MIAMI SPRING, FL 33166

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SOSA, SABINO
Address: 3101 SW 102 AVENUE
City-St-Zip: MIAMI, FL 33165

Title: VD ( ) Delete
Name: CAPOTE, PEDRO M
Address: 6141 NW 40 TERRACE
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: TD ( ) Delete
Name: CAPOTE, JUAN C
Address: 5041 NW 114 COURT
City-St-Zip: MIAMI, FL 33178

Title: SD ( ) Delete
Name: CAPOTE, RICHARD
Address: 1280 RAVEN AVENUE
City-St-Zip: MIAMI SPRINGS, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD CAPOTE SD 01/05/2004

Electronic Signature of Signing Officer or Director — Date