


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90579 031 \*\*\*150.00

<b>DOCUMENT # P0000075103</b> 1. Entry Name <b>BENGAL PETROLEUM 2000, INC.</b>			
Principal Place of Business 1525 N.W. 3RD ST., STE. #14 DEERFIELD BEACH, FL 33442		Mailing Address 1525 N.W. 3RD ST., STE. #14 DEERFIELD BEACH, FL 33442	
2. Principal Place of Business 10245 LA REINARD Suite, Apt. #, etc. Delray Beach, FL City & State		2. Mailing Address 10245 LA REINARD Suite, Apt. #, etc. Delray Beach City & State FL	
Zip 33446		Country Palm Beach	
Zip 33446		Country PALM BEACH	
3. Name and Address of Current Registered Agent KHAN, MOHAMMED D 10245 LA REINA RD. DEERFIELD BEACH, FL 33442		4. FEI Number 65-0791899	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. 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.		7. Name and Address of New Registered Agent Name MOHAMMED D. KHAN Street Address (P.O. Box Number is Not Acceptable) 10245 LA Reina Rd. City DELRAY BEACH State FL Zip Code 33446	
SIGNATURE: <i>Mohammed D Khan</i> Signature, typed or printed name of registered agent and title if applicable.		DATE: 4/22/04 (NOTE: Registered Agent signature required when retreating)	
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$800.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD <input type="checkbox"/> Delete NAME KHAN, MOHAMMED D STREET ADDRESS 10245 LA REINA RD. CITY - ST - ZIP DEERFIELD BEACH, FL 33442	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Mohammed D Khan</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: 4/22/04 954-570-0822 DATE DAYTIME PHONE #	