## **2007 FOR PROFIT CORPORATION** ANNUAL REPORT

SIGNATURE:

## May 15, 2007 8:00 am Secretary of State DOCUMENT # P00000109786 05-15-2007 90020 001 \*1.050.00 1. Entity Name **BRYAN PETROLEUM CORPORATION** Principal Place of Business Mailing Address 66014902 19075 NW 37TH AVE 19075 NW 37TH AVE MIAMI, FL 33056 MIAMI, FL 33056 No Chg-P CR2E034 (11/05) 03272007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1061557 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent SIDDIQUE, MOHAMMAD DO NOT WRITE 19075 NW 37TH AVE MIAMI, FL 33056 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be П Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE SIDDIQUE, MOHAMMAD NAME 19075 NW 37TH AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33056 TITLE NAME SIDDIQUE, ELVA STREET ADDRESS 19075 NW 37TH AVE MIAMI, FL 33056 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRIT C/TY-ST-7IP IN THIS SPAC NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied entering the properties 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 of trusters 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 attachmer ss, with all other like empowered.

ED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Daytime Phone #