

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90112 007 ***150.00

DOCUMENT # P00000113771
 1. Entity Name
 DIRECT PETROLEUM ENTERPRISES INC.



Principal Place of Business: 8800 SW 104TH STREET, MIAMI, FL 33176
 Mailing Address: 8800 SW 104TH STREET, MIAMI, FL 33176

50029094



2. Principal Place of Business: 2401 NW 30th Ave
 3. Mailing Address: 2401 NW 30th Ave
 Suite, Apt. #, etc.

02032005 Chg-P CR2E034 (10/03)

City & State: Miami FL
 Zip: 33142 Country: --
 City & State: Miami FL
 Zip: 33142 Country: --

4. FEI Number: 65-1065954
 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 PEQUENTO, MILADY
 8800 SW 104TH STREET
 MIAMI, FL 33176

7. Name and Address of New Registered Agent
 Name: Joe B. Cox, c/o Cox & Nici
 Street: 1185 Immokalee Rd., Suite 110
 City: Naples, FL 34110
 State: FL 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: Joe B. Cox
 (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: PD	NAME: PEQUENO, TOMAS	<input checked="" type="checkbox"/> Delete
STREET ADDRESS: 8800 SW 104TH STREET	CITY-ST-ZIP: MIAMI, FL 33176	
TITLE: TD	NAME: PEQUENO, GLADYS	<input checked="" type="checkbox"/> Delete
STREET ADDRESS: 8800 SW 104TH STREET	CITY-ST-ZIP: MIAMI, FL 33176	
TITLE: SD	NAME: PEQUENO, MILADY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS: 8800 SW 104TH STREET	CITY-ST-ZIP: MIAMI, FL 33176	
TITLE: _____	NAME: _____	<input type="checkbox"/> Delete
STREET ADDRESS: _____	CITY-ST-ZIP: _____	
TITLE: _____	NAME: _____	<input type="checkbox"/> Delete
STREET ADDRESS: _____	CITY-ST-ZIP: _____	
TITLE: _____	NAME: _____	<input type="checkbox"/> Delete
STREET ADDRESS: _____	CITY-ST-ZIP: _____	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: _____	NAME: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: _____	CITY-ST-ZIP: _____	
TITLE: _____	NAME: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: _____	CITY-ST-ZIP: _____	
TITLE: _____	NAME: D, P, V, T, S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS: 2401 NW 30th Avenue	CITY-ST-ZIP: Miami, FL 33142	
TITLE: _____	NAME: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: _____	CITY-ST-ZIP: _____	
TITLE: _____	NAME: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: _____	CITY-ST-ZIP: _____	

12. I hereby certify 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 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: Tomas Pequeno, Jr. Date: March 17, 2005
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR