FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91836 032 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000001052

1. Entity Name
ADIL PETROLEUM CORPORATION

Principal Place of Business	Mailing Address
3201 NW 183 ST MIAMI, FL 33056	910 ~~10~~ GREEN BRIAR AVE DAVIE, FL 33325

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
3201 NW 183 st	910 Greenbriar ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: miami FL.	City & State: Davie FL
Zip: 33056 Country: miamiDADE	Zip: 33325 Country: Broward

4. FEI Number: 65-1066738 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
UL-HAQ, ESHAN 910 GREEN BRIAR AVE FORT LAUDERDALE, FL 33325	Name: Street Address (P.O. Box Number is Not Acceptable): City: 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: Ehsan ul Haq 4/29/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Fee is $150.00 ... Check payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PSTD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	HAQ, EHSAN U		NAME		
STREET ADDRESS	910 GREEN BRIAR AVE		STREET ADDRESS		
CITY-ST-ZIP	DAVIE, FL 33325		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
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TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (10/02)

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: Ehsan ul Haq 4/29/2003 305-624-0131
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #