


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 16, 2008 8:00 am**  
**Secretary of State**

05-16-2008 90027 037 \*\*\*150.00

<b>DOCUMENT # P01000007539</b>	
1. Entity Name <b>AMOCO 54, INC.</b>	

Principal Place of Business <b>621 MONTE CRISTO BLVD TIERRA VERDE, FL 33715</b>	Mailing Address <b>621 MONTE CRISTO BLVD TIERRA VERDE, FL 33715</b>
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**DO NOT WRITE IN THIS SPACE**

401000



04272008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3690823</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>ZAKI, ASHRAF 621 MONTE CRISTO BLVD TIERRA VERDE, FL 33715</b>
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**DO NOT WRITE  
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZAKI, ASHRAF 621 MONTE CRISTO BLVD TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SABA, WALID 621 MONTE CRISTO BLVD TIERRA VERDE, FL 33715
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**ZAKI ASHRAF  
1644 AVE N.  
TIERRA VERDE FL 33715**

**DO NOT WRITE  
IN THIS SPACE**

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 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: <u><i>ASHRAF-ZAKI</i></u> <b>ASHRAF-ZAKI</b>	Date <u>4-27-08</u>	Daytime Phone # <u>727 480-8780</u>
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