

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90132 048 ***150.00

DOCUMENT # P01000028297

1. Entity Name

SEABOARD PETROLEUM, INC.

Principal Place of Business

**1440 CORAL RIDGE DRIVE #268
 CORAL SPRINGS FL 33071**

Mailing Address

**1440 CORAL RIDGE DRIVE #268
 CORAL SPRINGS FL 33071**

2. Principal Place of Business

12155 CLASSIC DRIVE

3. Mailing Address

12155 CLASSIC DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

4. FEI Number

65-0097233

Applied For

Not Applicable

Zip

33071

Country

BROWARD

Zip

33071

Country

BROWARD

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FAYA, MARIA

**1440 CORAL RIDGE DRIVE #268
 CORAL SPRINGS FL 33071**

7. Name and Address of New Registered Agent

Name **MARIA ANDERSEN**

Street Address (P.O. Box Number is Not Acceptable)
12155 CLASSIC DRIVE

City **CORAL SPRINGS, FL**

Zip Code **33071**

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.

SIGNATURE

Maria C. Andersen

4/10/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
 NAME **FAYA, MARIA**
 STREET ADDRESS **1440 CORAL RIDGE DRIVE #268**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☐ Change ☒ Addition
 NAME **JAMES ANDERSEN**
 STREET ADDRESS **12155 CLASSIC DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

TITLE **VICE PRESIDENT** ☐ Change ☒ Addition
 NAME **MARIA ANDERSEN**
 STREET ADDRESS **12155 CLASSIC DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02
 Date

757-3094
 Daytime Phone #

CR2E034 (9/01)