

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000033334

1. Entity Name
PETROMART USA, INC.

APPROVED
AND
FILED

03 JUN 16 PM 5:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2002-2003 UBR

Principal Place of Business
~~263 HERMITAGE HILLWAY~~
~~VALRICO FL 33594~~

Mailing Address
~~263 HERMITAGE HILLWAY~~
~~VALRICO FL 33594~~

2. Principal Place of Business
5900 Lucerne Park Road
Winter haven, FL-33881

3. Mailing Address
5900 Lucerne Park Road
S Winter haven, FL-33881

City & State
Zip Country

City & State
Zip Country

4. FEI Number 59-3705212
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
HOQUE, SHEIKH M
~~263 HERMITAGE HILLWAY~~
~~VALRICO FL 33594~~
5900 LUCERNE PARK RD
WINTER HAVEN, FL
FL 33881

7. Name and Address of New Registered Agent
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	PD HOQUE, SHEIKH M 263 HERMITAGE HILLWAY VALRICO FL 33594 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOSSAIN, AK I 263 HERMITAGE HILLWAY VALRICO FL 33594 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHAIFUZZAMAN, SIKDAR M 263 HERMITAGE HILLWAY VALRICO FL 33594 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: SK SIGNATURE REQUIRED SHEIKH MOHTIBUL HOQUE, PRES.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

2053

A & K BOOKKEEPING & TAX CONSULTANTS

Syed H. Sharfi, M.B.A., B.B.A.

Accounting & Tax, Fla Atlantic University

Asif S. Sharfi, CPA

Office & fax (561) 640-4010

Residence (561) 697-3086

April 28, 2003

Secretary of State
Tallahassee, FL

Dear Sir or Madam:

Charter # P01000033334 / PETROMART USA INC.

Please find enclosed Application of Reinstatement of Petromart USA Inc. we had changed our address and had notified the Post Office , but something gone wrong and we could not get the UBR in original. **Your good office can also see our old address which should be changed, to our new address as appeared on Reinstatement Application , please.**

We are extremely thankful for you sympathetic consideration in this matter.

Please process these requests and send a letter confirming that this Corporation is active .

Thank you.

Regards,


Syed Sharfi

Ak Bookkeeping & Tax Consultant.

4623 Forest Hill Blvd. , Suit 109-2.

W.P.B., Fla 33415

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Dated 6/9/03

The Department of State
Tallahassee, Fl

Att "Kathy Ashton "

Dear Mam,

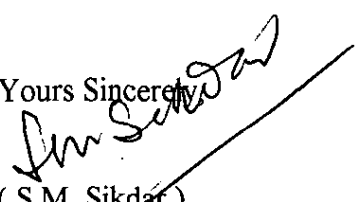
I would like to submit the very facts to your sympathetic consideration in response to your letter dated May 29th 2003.

That we received this old UBR Form from the new the person living at our old place to whom we met in a common Business place. He referred about this UBR and mailed to us this old UBR Form . We then, immediately on 4/28/03 filed for reinstatement through our Accountant Office.

Please reconsider our request and oblige to us in the name of mercy. It is also requested to send all mail to our Accountant Office please, at under given address:

Thanking you.

Yours Sincerely,


(S.M. Sikdar)

4623 Forest Hill Blvd. , Suit 109-2
W.P.B., Fl 33415

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