

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 03, 2003 8:00 am
Secretary of State

07-03-2003 90033 009 ***150.00

DOCUMENT # P01000039694

1. Entity Name
MONTENEGRO OIL ENTERPRISE, INC.



Principal Place of Business
**9441 C BOCA GARDENS CIRCLE SOUTH
BOCA RATON FL 33496**

Mailing Address
**9441 C BOCA GARDENS CIRCLE SOUTH
BOCA RATON FL 33496**



2. Principal Place of Business
10 N.W. 167 STREET

3. Mailing Address
10 N.W. 167 STREET

Suite, Apt. #, etc.
N. MIAMI BCH FL 33169

Suite, Apt. #, etc.
N. MIAMI BCH FL 33169

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number **65-1104280**

Applied For
Not Applicable

Zip Country

Zip Country

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

MONTENEGRO, DONALD P
9441 C BOCA GARDENS CIRCLE SOUTH
BOCA RATON FL 33496

Name
MONTENEGRO DONALD P
Street Address (P.O. Box Number is Not Acceptable)
10 N.W. 167 STREET
N. MIAMI BCH FL 33169
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 Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make 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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PSD	MONTENEGRO, DONALD P	9441 C BOCA GARDENS CIRCLE SOUTH	BOCA RATON FL 33496	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PSD	MONTENEGRO DONALD P	N. MIAMI BCH FL 33169		<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/03

✓ (905) 945 7474

Date

Daytime Phone #

CR2E034 (10/02)