

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2002 8:00 am
Secretary of State

08-14-2002 90026 038 ***150.00

DOCUMENT # P01000058941

1. Entity Name
SAM'S PETRO MART, INC.



Principal Place of Business

**1238 EDGEWATER DRIVE
 LAKELAND FL 33805**

Mailing Address

**1238 EDGEWATER DRIVE
 LAKELAND FL 33805**

2. Principal Place of Business

3133 ARROW DRIVE

3. Mailing Address

3133 ARROW DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KISSIMMEE FL

City & State

KISSIMMEE, FL

4. FEI Number

59-3723448

Applied For

Not Applicable

Zip

34746

Country

Zip

34746

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BATRA, HARISH K
 1238 EDGEWATER DRIVE
 LAKELAND FL 33805**

7. Name and Address of New Registered Agent

Name

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

3133 ARROW DR.

City

KISSIMMEE

FL

Zip Code

34746

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

8/9/02

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
 NAME **BATRA, HARISH K**
 STREET ADDRESS **1238 EDGEWATER DRIVE**
 CITY-ST-ZIP **LAKELAND FL 33805** **KISSIMMEE, FL 34746**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **BATRA, SAMEER**
 STREET ADDRESS **1238 EDGEWATER DRIVE**
 CITY-ST-ZIP **LAKELAND FL 33805** **KISSIMMEE, FL 34746**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/9/02

Date

Daytime Phone #

CR2E034 (4/02)

All @ check

#P0100005 8941

Sam's Petro Mart, Inc.
3133 Arrow Drive
Kissimmee, FL 34746
(863)398-2928

August 9, 2002

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302

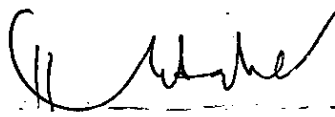
Dear Sir or Madam:

I am enclosing the annual report. We ask that you allow us to pay the original fee of \$150.00.

We started business in 2001 and were not aware of the report. During the year we changed our address and therefore never received the report you originally mailed to us. It was not until the second noticed was forwarded to us, that we knew of the fee.

Thank you for your consideration.

Sincerely,



Harish Batra, President