## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P01000081256 DOCUMENT #

1. Entity Name

NWFP PETROLEUM CORP.



Mar 24, 2003 8:00 am & Secretary of State **FILED** 

03-24-2003 90176 047 \*\*\*150.00

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Principal Place of Business 11163 TAMIAMI TRAIL EAST NAPLES FL 34113

Mailing Address 11163 TAMIAMI TRAIL EAST NAPLES FL 34113

2. Principal Place of Business			3. Mi	3. Mailing Address				CONTRACTOR DESIGNATION CONTRACTOR				
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES .				
City & State				City & State			4.	FEI Number <b>59-3742067</b>			Applied For Not Applicable	
Zip	Country			Zip Cour		try	5.	5. Certificate of Status Desired		\$8.75 Additional Fee Required		
	6. Name	and Address of Ci	urrent Registe	red Agent		7. Name and Address of New Registered Agent						
						Name						
ULLAH, NAJEEB 11163 TAMIAMI TR EAST				Stre			eet Address (P.O. Box Number is Not Acceptable)					
NAPLES FL 34113												
· ·						City			FL	Zip Co	de	
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.												
and the same of th												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
FILE NOWILL FEE IS \$150.00 \$5:00: May Be											00:	
After May 1, 2003 Fee will be \$550.00							· ·	9. Election Campaign Finance Trust Fund Contribution.			00 May Be	
Make Check Payable to Florida Department of State												
10.		OFFICERS	S AND DIRECT	ORS	11.		Al	DDITIONS/CHANGES TO OFFICE	RS AND !	DIRECTO		
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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:

zire required SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #