

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2008 8:00 am
Secretary of State

07-23-2008 90016 009 ***150.00

DOCUMENT # P01000102175

1. Entity Name
UNIVERSAL OIL, INC.



Principal Place of Business
**6860 DANIELS PARKWAY
FORT MYERS, FL**

Mailing Address
**6860 DANIELS PARKWAY
FORT MYERS, FL**

40111892



2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

06022008 Chg-P CR2E034 (12/06)

City & State
Zip Country

City & State
Zip Country

4. FEI Number
65-1145003

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SCHREIBER, DARRY S ESQ.
5600 SHERIDAN STREET
HOLLYWOOD, FL 33021**

7. Name and Address of New Registered Agent

Name
ISP HANIE BAKSH

Street Address (P.O. Box Number is Not Acceptable)
8559 EL MIRASOL CT.

City
FT. MYERS FL Zip Code
33912

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 **07-07-08**

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAKSH, ISPHANIE 6860 DANIELS PARKWAY FORT MYERS, FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BAKSH, PARANDAI 6860 DANIELS PARKWAY FORT MYERS, FL	<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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	8559 EL MIRASOL CT. FT. MYERS, FLA 33912	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8559 EL MIRASOL CT. FT. MYERS, FLA 33912	<input checked="" 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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 DATE **07-07-08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

239-768-1477.