


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 20, 2006 8:00 am**  
**Secretary of State**

03-20-2006 90013 024 \*\*\*150.00

**DOCUMENT # P02000012850**  
 1. Entity Name  
 MIAMI LAKES OIL, INC.



Principal Place of Business 8040 MIAMI LAKES DR W MIAMI LAKES, FL 33314	Mailing Address 8040 MIAMI LAKES DR W MIAMI LAKES, FL 33314
---	---

**DO NOT WRITE IN THIS SPACE**



02132006 No Chg-P CR2E034 (11/05)

4. FEI Number 04-3599390	Applied For Not Applicable
-----------------------------	-------------------------------

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

6. Name and Address of Current Registered Agent  
 UDDIN, MOHAMMED J.  
 15570 NW 12TH PL  
 PEMBROKE PINES, FL 33020

**DO NOT WRITE IN THIS SPACE**

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)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOOD, SANJAY 3556 S.W. 173 WAY MIRAMAR, FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD UDDIN, MOHAMMED J 15570 NW 12TH PL PEMBROKE PINES, FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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: *Uddin* *VPD* 2/23/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #