

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90390 033 ***150.00

DOCUMENT # P02000013251 1. Entity Name DECOIL DRILLING INC.					
Principal Place of Business 871 22ND STREET, SE NAPLES, FL 34117			Mailing Address 871 22ND STREET, SE NAPLES, FL 34117		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 80-0033234	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STEWART, JAMES C JR. STEWART & STORTER, ATTORNEYS AT LAW 11926 COLLIER BLVD., SUITE 101 GOLDEN GATE, FL 34116-6543 CHANGE OF ADDRESS ONLY				7. Name and Address of New Registered Agent Name JAMES C. STEWART, JR., Esq. Street Address (P.O. Box Number is Not Acceptable) 9180 Galleria Ct., #700 City Naples FL 34109	
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 _____ (NOTE: Registered Agent Signature required when establishing) _____ 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	D DECOIL, JOSEPH JR. 871 22ND STREET, SE NAPLES, FL 34117		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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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 an other like empowered.					
SIGNATURE: _____			JOSEPH DECOIL, Pres.		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			(239) 353-0791		

CR2E034 (10/02)