

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2003 8:00 am
Secretary of State

8/1/2

08-01-2003 90064 036 ***150.00

DOCUMENT # P02000115960

1. Entity Name
301 WASHINGTON CITGO INC.



Principal Place of Business
**1634 N. WASHINGTON
SARASOTA FL 34236**

Mailing Address
**1634 N. WASHINGTON
SARASOTA FL 34236**

55054708

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

22-3879641

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ALNADI, IBRAHIM
2788 FRUITVILLE RD
SARASOTA FL 34237**

Name
ABDEL SAMAD ABDALLAH
Street Address (P.O. Box Number is Not Acceptable)
718 MC CARTHER AVE
City
SARASOTA FL Zip Code
34243

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)

ABDEL SAMAD ABDALLAH

7/18/03

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ALNADI, IBRAHIM
2788 FRUITVILLE RD
SARASOTA FL 34237** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P.S
ABDALLAH, ABDEL SAMAD
718 MC CARTHER AVE
SARASOTA FL 34243** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V.P.T
ALNADI, IBRAHIM
2788 FRUITVILLE RD
SARASOTA FL 34237** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ABDALLAH, ABDEL SAMAD
718 MC CARTHER AVE
SARASOTA FL 34243** ☐ Change ☒ Addition

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

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

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

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

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 fees empowered.

SIGNATURE:

ABDEL SAMAD ABDALLAH 7/18/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

55054708
#P02000115960

**301 WASHINGTON CITGO INC.
1634 N. WASHINGTON
SARASOTA, FL 34236**

Dear Sir/ Madam:

Please find attached the 2003 Uniform Business Report and a check for \$150.00. We request that you waive any penalty charged for late filing as this was the first time we file this report and had no prior knowledge of its existence. We also believe that we did not receive a previous notice to alert us to the requirement to pay by a certain date.

Your understanding and consideration will be greatly appreciated.

Sincerely,

Abdelsamad Abdallah
President