

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000130163 1. Entity Name UNITED GAS & CONVENIENCE INC.	
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Principal Place of Business 935 N. COCOA BLVD. #1015 COCO A, FL 32922	Mailing Address 55 WASHINGTON ST., #306 EAST ORANGE, NJ 07017
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DO NOT WRITE IN THIS SPACE



01282004 No Chg-P CR2E034 (10/03)

4. FEI Number 33-1034465	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DAHMI, ABDELHAK
18002 RICHMOND PL. DR.
#1015
TAMPA, FL 33647**

**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.

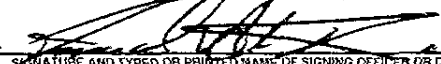
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000050836 02/16/04-80027-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DAHMI, ABDELHAK 18002 RICHMOND PL. DR. TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP ABUROMI, IMAD 57 COURTLAND ST. PATERSON, NJ 07503
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TR ABUROMI, ZIYAD 57 COURTLAND ST. PATERSON, NJ 07503
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: X  **2/11/04** **321-454-6494**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone