2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000020425

1. Entity Name
ADAMO PETROLEUM, INC.

Principal Place of Business	Mailing Address
9203 ADAMO DRIVE TERRACE TAMPA, FL 33619 US	9203 ADAMO DRIVE TERRACE TAMPA, FL 33619 US

DO NOT WRITE IN THIS SPACE

04262005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
84-1619017	Not Applicable

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

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6. Name and Address of Current Registered Agent

SABA, WALID
9203 ADAMO DRIVE TERRACE
TAMPA, FL 33619

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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)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

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10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SABA, WALID
STREET ADDRESS	9203 ADAMO DRIVE TERRACE
CITY-ST-ZIP	TAMPA, FL 33619

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 all other like empowered

SIGNATURE: _Walid Saba_   WALID SABA   4-25-05   813-888-6500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #