

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028518

Entity Name: ST. THOMAS OIL INC.

FILED
Jan 28, 2008
Secretary of State

Current Principal Place of Business:

2903 HARBOR CITY BLVD
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

2903 HARBOR CITY BLVD
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 43-2004847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUKOSE, JOMON
1832 SURREY CT
VIERA, FL 32955 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LUKOSE, JOMON
Address: 1832 SURREY CT
City-St-Zip: VIERA, FL 32955

Title: D () Delete
Name: CHANDRY, JOSEPH
Address: 9004 MARYLAND STREET
City-St-Zip: NILES, IL 60714

Title: D () Delete
Name: JOSEPH, SIBY
Address: 615 JILL CT.
City-St-Zip: DESPLAINES, IL 60018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LAISAMMA, JOSEPH
Address: 9004 MARYLAND STREET
City-St-Zip: NILES, IL 60714

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOMON LUKOSE

PD

01/28/2008

Electronic Signature of Signing Officer or Director

Date