

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044920

Entity Name: N. M. PETROCO INC

FILED  
Sep 01, 2005  
Secretary of State

## Current Principal Place of Business:

199, 20TH STREET, 2ND AVENUE  
BOCA RATON, FL 33433 US

## New Principal Place of Business:

## Current Mailing Address:

199, 20TH STREET, 2ND AVENUE  
BOCA RATON, FL 33433 US

## New Mailing Address:

FEI Number: 91-2192225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATLOOB, NUDRAT  
199, 20TH STREET, 2ND AVENUE  
BOCA RATON, FL 33433 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MATLOOB, NUDRAT  
Address: 199, 20TH STREET, 2ND AVENUE  
City-St-Zip: BOCA RATON, FL 33433 US

Title: VP ( ) Delete  
Name: MATLOOB, KIBRIYA  
Address: 199, 20TH STREET, 2ND AVENUE  
City-St-Zip: BOCA RATON, FL 33433 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MATLOOB, NUDRAT  
Address: 199, 20TH STREET, 2ND AVENUE  
City-St-Zip: BOCA RATON, FL 33433 US

Title: VPD (X) Change ( ) Addition  
Name: MATLOOB, KIBRIYA  
Address: 199, 20TH STREET, 2ND AVENUE  
City-St-Zip: BOCA RATON, FL 33433 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NUDRAT MATLOOB

PD

09/01/2005

Electronic Signature of Signing Officer or Director

Date