

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000065127

1. Entity Name
1600 FUELS INC.



FILED

05 MAY 26 PM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1600 E OAKLAND PARK BLVD
OAKLAND PARK, FL 33156

Mailing Address
1655 PALM BEACH LAKES BLVD
SUITE 208
WEST PALM BEACH, FL 33401

2. Principal Place of Business

3. Mailing Address

12305 S. DIXIE HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04212005

Chg-P

CR2E034 (10/03)

City & State

City & State

MIAMI FL

Zip

Country

Zip

33156

Country

4. FEI Number

65-1194418

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

SAGAR, ALAN
1655 PALM BEACH LAKES BLVD
SUITE 208
WEST PALM BEACH, FL 33401

Name

LENARD GORMAN

Street Address (P.O. Box Number is Not Acceptable)

1320 S. DIXIE HWY, PH 1295

City

CORAL GABLES

FL

Zip Code

33146

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 reconstituting)

DATE

4/26/05

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME SAGAR, ALAN
STREET ADDRESS 1655 PALM BEACH LAKES BLVD #208
CITY-ST-ZIP WEST PALM BEACH, FL 33401 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
000055973560
06/09/05--01038--025 **\$61.25

TITLE V
NAME HASAN, ROKIBUL
STREET ADDRESS 1655 PALM BEACH LAKES BLVD #208
CITY-ST-ZIP WEST PALM BEACH, FL 33401 ☒ Delete

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

TITLE VP
NAME FONTECILLA, CARLOS
STREET ADDRESS 12305 S DIXIE HIGHWAY
CITY-ST-ZIP MIAMI, FL 33156 ☐ Delete

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

TITLE VP
NAME BEGELMAN, CAROL
STREET ADDRESS 12305 S DIXIE HIGHWAY
CITY-ST-ZIP MIAMI, FL 33156 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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 like empowered.

SIGNATURE:

C. Begelman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/05

Date

Daytime Phone #