


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90043 014 ***150.00

DOCUMENT # P03000075418

1. Entity Name
 72/96 PETROLEUM ENTERPRISES, INC.



Principal Place of Business: 8800 SW 104 ST, MIAMI, FL 33176
 Mailing Address: 8800 SW 104 ST, MIAMI, FL 33176

50030881



2. Principal Place of Business: 2401 NW 30th Avenue
 Suite, Apt. #, etc.

3. Mailing Address: 2401 NW 30th Avenue
 Suite, Apt. #, etc.

02082005 Chg-P CR2E034 (10/03)

City & State: Miami, FL
 Zip: 33142 Country

City & State: Miami, FL
 Zip: 33142 Country

4. FEI Number: APPLIED FOR 73-1673043
 Applied For: Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ARAZOZA & FERNANDEZ-FRAGA P.A.
 2100 SALZEDO ST STE 300
 CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent
 Name: Joe B. Cox c/o Cox & Nici
 Street Address (P.O. Box Number is Not Acceptable):
 1185 Immokalee Rd Suite 110
 City: Naples FL Zip Code: 34110

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

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

10. OFFICERS AND DIRECTORS

TITLE	DPS	<input type="checkbox"/> Delete
NAME	PEQUENO, TOMAS	
STREET ADDRESS	8800 SW 104 ST	
CITY-ST-ZIP	MIAMI, FL 33176	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V, T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2401 NW 30th Ave, Miami, FL 33142	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:  Tomas Pequeno, President 3/21/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #