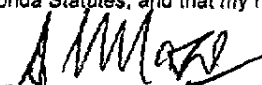


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000081969			
1. Entity Name			
Pak Petroleum Inc			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 201 West Hwy 436 Suite, Apt. #, etc.		3. Mailing Address 201 West Hwy 436 Suite, Apt. #, etc.	
City & State Altamonte springs, FL		City & State Altamonte springs, FL	
Zip 32714	Country	Zip 32714	Country
		4. FEI Number 20-0114071	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE		7. Name and Address of Current Registered Agent	
		Name MEHDI, RAZA	
		Street Address (P.O. Box Number is Not Acceptable) 201 WEST HWY 436	
		City ALTAMONTE SPRINGS FL 32714	
		FL	Zip Code 32714
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		000000480838 04/11/06-80008-003 150.00 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P T RAZA, MEHDI 201 WEST HWY 436 ALTAMONTE SPRINGS FL 32714 US	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VP RAZA, AHSAN 201 WEST HWY 436 ALTAMONTE SPRINGS FL 32714 US	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 on an attachment with an address, with all other like empowered.			
SIGNATURE:  MEHDI RAZA		Date 7/23/06	Daytime Phone # (407) 782-6094
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			