2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2005 08:00 AM Secretary of State

Daytime Phone #

				_		orrotary.	7 At Stat
DOCUMENT # P03000093461 1. Entity Name CHAMBLISS PETROLEUM CORP.				50	ecretary	oi Stat	
Principal Plac	e of Business	Mailing Address					
6550 N. FED	DERAL HWY	6550 N. FEDERAL HWY		j			
SUITE 240	RDALE, FL 33308	SUITE 240 FORT LAUDERDALE, FL 33308	2	}			
	AMART LE SASO		, 				
	To white the state of the state		and the second of	<u> </u>		 	<u> </u>
DO NOT WRITE IN THIS SPAC			CE	01192005	No Chg-P	CR2E034 (10)	/03)
				4. FEI Numbs			Applied For
i				20-019	4750		Not Applicable
				5. Certificate	of Status Desired	☐ \$8.75 Fee Re	Additional quired
	8. Name and Address of Current R	egistered Agent			The second second		1
CHAMBLE	SS JOE A	<u> </u>		- DA	NIOT 140	-	
CHAMBLISS, JOE A 6550 N. FEDERAL HWY			<u> </u>	טט	NOT W	KIIE	
SUITE 240 FORT LAUDERDALE, FL 33308			}	IN 7	THIS SF	ACE	
)			<u>}</u>				
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 retristating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Campaign Finar Trust Fund Contribution.	noing \$5	.00 May Be led to Fees			
10.	OFFICERS AND D	RECTORS				M 8 . W.71	
TITLE NAME	PD CHAMBLISS, JOE A	A STATE OF THE SALE	== <u></u>				
STREET ADDRESS	6550 NORTH FEDERAL HIGHWA	Y #240	1				~
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308					1000001	
TITLE	STD	•			-04/29/05-	1342371 -80052-014	£ 150.00
NAME STREET ADDRESS	WHEELER, RICHARD L 6550 NORTH FEDERAL HIGHWA	Y #240			- 11 march 1/2008	enamente (m.e.	i Albertar Mitaliber
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		<u></u>				
TITLE						·	
NAME STREET ADDRESS			Į.		NOT 14		
CITY-ST-ZIP	<u> </u>			טט	NOT W	KIIE	
TITLE			ł	IN 7	THIS SF	PACE	
NAME STREET ADDRESS				# RE			
CITY-ST-ZIP							
TITLE	 	11 W.	[
NAME							
STREET ADDRESS CITY-ST-ZIP							
TITLE				·- <u></u>	=		. 역도 일등 다
NAME	1		[<u> </u>	
STREET ADDRESS			}				

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 reserver or trustree empowered the exercise 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.

SIGNATORE NO TITLED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: