

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 04, 2005 8:00 am**  
**Secretary of State**

02-04-2005 90053 040 \*\*\*150.00

**DOCUMENT # P03000097760**

1. Entity Name

**TANKER OIL CORPORATION**



Principal Place of Business

11550 N.W. 36 AVENUE  
MIAMI FL 33167

Mailing Address

11550 N.W. 36 AVENUE  
MIAMI FL 33167

**50010711**



1st MOORE CR2E034 (10/04)

2. Principal Place of Business

7950 NW 58 ST

3. Mailing Address

PO BOX 563097

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Doral FLORIDA

City & State

Miami FL

Zip

33166

Country

USA

Zip

33256

Country

USA

4. FEI Number

41-2108218  
AP-PLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JOHNSTON, STEVEN W  
11550 N.W. 36 AVENUE  
MIAMI FL 33167

7. Name and Address of New Registered Agent

Name

Johnston Steven W

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

7950 NW 58 St.

City

Miami FL

FL

Zip Code

33166

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete  
NAME JOHNSTON, STEVEN W  
STREET ADDRESS 11550 N.W. 36 AVENUE  
CITY-ST-ZIP MIAMI FL 33167

TITLE V ☒ Delete  
NAME PEREZ, EUGENIO  
STREET ADDRESS 11550 N.W. 36 AVENUE  
CITY-ST-ZIP MIAMI FL 33167

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition  
NAME Johnston Steven W  
STREET ADDRESS PO BOX 563097  
CITY-ST-ZIP Miami FL 33256

TITLE V ☒ Change ☐ Addition  
NAME Perez, Eugenio  
STREET ADDRESS PO BOX 563097  
CITY-ST-ZIP Miami FL 33256

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

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

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

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #