

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033503

FILED
Jan 11, 2005
Secretary of State

Entity Name: AMERICAN PETROLEUM IMAGING CORPORATION

Current Principal Place of Business:

P.O. BOX 54
DADE CITY, FL 33526

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 54
DADE CITY, FL 33526

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLETTE, TERRY L
41201 MESSICK RD
DADE CITY, FL 33525 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GILLETTE, TERRY L
Address: P.O. BOX 54
City-St-Zip: DADE CITY, FL 33526

Title: D () Delete
Name: SINGLETARY, RICHARD
Address: P.O. BOX 54
City-St-Zip: DADE CITY, FL 33526

Title: D () Delete
Name: LARKIN, BILL
Address: P.O. BOX 54
City-St-Zip: DADE CITY, FL 33526

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D;P (X) Change () Addition
Name: GILLETTE, TERRY L PRES
Address: P.O. BOX 54
City-St-Zip: DADE CITY, FL 33526

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: GILLETTE, DAVID L VICEPRE
Address: P.O. BOX 54
City-St-Zip: DADE CITY, FL 33526

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRY L. GILLETTE

PRES

01/11/2005

Electronic Signature of Signing Officer or Director

_____ Date