2005 FOR PROFIT CORPORATION

FILED Jan 20, 2005 8:00 am Secretary of State

ANNUAL REPORT						Secretary of State					
1. Entity Nam	MENT # P04000067 TROLEUM, INC.	442					01-20-2005 9	90037 020) ***150.	.00	
Principal Place of Business Mailing Address									5000	4081	
9009 PROSPERITY FARMS ROAD 9009 PROSPERITY FARMS ROAD									JUUU	4001	
NORTH PALM BEACH, FL 33403 NORTH PALM BEACH, FL 33403											
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2. Principal Place of Business 3. Mailing Address											
Suite, Apr. #, etc.					MI						
						01132005	Chg-P	CR2E0	34 (10/03)		
Rivera Beach FL City & State						4. FEI Numbe	105176	3		pplied For ot Applicable	
Zip Country Zip Co				try			of Status Desired		\$8.75 Add	litional	
3340	6. Name and Address of Current I	Registered Agent	<u> </u>						Fee Required	d	
Nama											
SHEIKH, NURUDDIN 9009 PROSPERITY FARMS ROAD					Sheikh, Nuruddin Street Address (P.O. Box Number is Not Acceptable) 4100 ILex CT						
				Cin					7:- 0-1		
Palm Ba							SNOPNE	<u>FL</u>		410	
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 Andria 1/13/05											
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 9. Election Campaign Financing \$5.00 May Be Added to Fees											
10.	OFFICERS AND I	DIRECTORS	11.				CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.											
SIGNATURE: Nation 1/13/05											
	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER	OR DIRECT	UR			Date	0	aytime Phone #		