

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90175 009 ***150.00

DOCUMENT # P04000076953

1. Entity Name
MANSIA PETROLEUM, INC.



Principal Place of Business
**501 E. ATLANTIC BOULEVARD
POMPAÑO BEACH, FL 33060**

Mailing Address
**501 E. ATLANTIC BOULEVARD
POMPAÑO BEACH, FL 33060**

2. Principal Place of Business
2995 S. 25TH STREET
Suite, Apt. #, etc.

3. Mailing Address
2995 S. 25TH STREET
Suite, Apt. #, etc.

City & State
FT. PIERCE, FL
Zip
34981 Country
USA

City & State
FT. PIERCE, FL
Zip
34981 Country
USA

01242005 Chg-P CR2E034 (10/03)

4. FEI Number
80-0120435

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SARKAR, MANJINDER
501 E. ATLANTIC BOULEVARD
POMPAÑO BEACH, FL 33060**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
2995 S. 25TH STREET
City **FT. PIERCE** **FL** Zip Code **34981**

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**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME **D SARKAR, MANJINDER** ☐ Delete
STREET ADDRESS
CITY-ST-ZIP **501 E. ATLANTIC BOULEVARD
POMPAÑO BEACH, FL 33060**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **PRES, SECY** ☒ Change ☒ Addition
STREET ADDRESS
CITY-ST-ZIP **2995 S. 25TH STREET
FT. PIERCE, FL 34981**

TITLE
NAME **V.P** ☐ Change ☒ Addition
STREET ADDRESS
CITY-ST-ZIP **AMIT HANDA
2995 S. 25TH STREET
FT. PIERCE, FL 34981**

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

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

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

TITLE
NAME ☐ Change ☐ Addition
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:

M. D. SARKAR - MANJINDER SARKAR

4-15-05

772-595-6462

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #