2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000020998

1. Entity Name

BRYAN PETROLEUM CORPORATION 103



Principal Place of Business

570 NW 79TH STREET MIAMI, FL 33150

Mailing Address

570 NW 79TH STREET MIAMI, FL 33150

FILED May 28, 2008 8:00 am Secretary of State

05-28-2008 90136 001 *1,350.00

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No Chg-P

CR2E034 (11/05)

4. FEI Number 20-2322540

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIDDIQUE, MOHAMMAD 570 NW 79TH STREET MIAMI, FL 33150

DO NOT WRITE IN THIS SPACE

					017(GE	
8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its regis	tered office or r	egistered agent, or both, in the S	state of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Regis	tered Agent signature	e required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fir Trust Fund Contribution		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIDDIQUE, MOHAMMAD 570 NW 79TH STREET MIAMI, FL 33150 V SIDDIQUE, ELVA 570 NW 79TH STREET MIAMI, FL 33150					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NO	T WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the examptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports frue 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 of 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:

TITLE
NAME
STREET ADDRESS

SIGNATURE AND TYRED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/88

Daytime Phone #