2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000100015

1. Entity Name

DEEP PETROLEUM INC.



Principal Place of Business

Mailing Address

620 NORTH DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168 620 NORTH DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168

US

FILED Apr 28, 2008 08:00 AN Secretary of State



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01142008 No Chg-P CR2E034 (11/05)

4. FEI Number 32-0177630

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

THE REST OF THE PARTY OF THE PA 6. Name and Address of Current Registered Agent

LODIA, PARDEEP K 1748 TRIBUTORY LANE PORT ORANGE, FL 32128

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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 a	зссері
	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, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000925644 05/20/08-80035-010 150.00

	OFFICERS AND DIRECTORS	_
10.	OFFICERS AND DIRECTORS	
TITLE	P,T	
NAME	LODIA, PARDEEP K	
STREET ADDRESS	1748 TRIBUTORY LANE	
CITY-ST-ZIP	PORT ORANGE, FL 32128	
THLE	VP,S	
NAME	LODIA, HARJIT S	
STREET ADDRESS	1748 TRIBUTORY LANE	
CITY - ST - ZIP	PORT ORANGE, FL 32128	
TITLE		_
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		_
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		_
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby	certify that the information supplied with this filling does not qualify for the	ex

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emptions contained in Chapter 119, 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 eath; 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.

IGNING OFFICER OR DIRECTOR