2008 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 01-11-2008 90071 015 ***150.00 **DOCUMENT # P07000123430** 1. Entity Name MORE PETROLEUM ENTERPRISES, INC. **գ**կկկեսս» Principal Place of Business Mailing Address 3101 NW 78TH AVE 3101 NW 78TH AVE HOLLYWOOD, FL 33024 HOLLYWOOD, FL 33024 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 7711 NW 7357 Suite, Apt. #, etc. Suite, Apt. #, etc 01072008 CR2E034 (12/06) 4. FEI Number Applied For M. KOOD 40274 26-7 Not Applicable Country. \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MOREJON, EMILIO SR. 3101 NW 78TH AVE HOLLYWOOD, FL 33024 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 Legistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE ☐ Addition TITLE Change MOREJON, EMILIO SR. NAME NAME STREET ADDRESS 3101 NW 78TH AVE STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33024 CITY-SI-ZIP TITLE ☐ Delete TITLE ORESIOEN Change ☐ Addition MORENO, JEAN SR. NAME NAME STREET ADDRESS 7711 NW 33RD ST STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33024 CITY - ST - ZIP TITLE ☐ Defete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions 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 oath; that I am an officer or director of the corporation or the receiver or trustee exprovered 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone

FILED Jan 11, 2008 8:00 am