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Apr 24 1997 8:00 am

Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000030042
1. Corporation Name
R and T PETROLEUM INC
237 N. KROME AVE
FLORIDA CITY FL 33034

Principal Place of Business Mailing Address
237 N. KROME AVE 237 N. KROME AVE
FLORIDA CITY FL 33034 FLORIDA CITY FL 33034

3. Date Incorporated or Qualified 04/12/1993 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address
21 237 N. KROME AVE 26 237 N. KROME AVE 4. FFI Number 65-0425913
Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For
Not Applicable

22 23 FLORIDA CITY FL 27 FLORIDA CITY FL 5. Certificate of Status Desired \$8.75 Additional Fee Required

23 28 FLORIDA CITY FL 29 33034 30 USA 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 33034 25 USA 29 33034 30 USA 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ISLAM, MOHAMMED M
237 N. KROME AVE
FLORIDA CITY FL 33034

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change Addition
NAME	12.693 TORREY DR BOCA RATON, FL 33428	12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY-STATE-ZIP		1.4 CITY-STATE-ZIP	
TITLE	NAME	2.1 TITLE	Change Addition
NAME	ISLAM MOHAMMED M	22 NAME	
STREET ADDRESS	6351 PALM TRAIL LANDING #16 DAVIE FL 33314	23 STREET ADDRESS	
CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	
TITLE	NAME	3.1 TITLE	Change Addition
NAME	KHAN, ABDUR-R	32 NAME	
STREET ADDRESS	1757 S CUREW LANE HOMESTEAD, FL 33035	33 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE	NAME	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE	NAME	5.1 TITLE	Change Addition
NAME		52 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	NAME	6.1 TITLE	Change Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Mohammed M Islam 4/24/97 305 246-0673
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #