

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000034973

1. Entity Name

ZAMBEZI PETROLEUM, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90140 028 ***150.00

Principal Place of Business

Mailing Address

7071 PHILLIPS HIGHWAY
JACKSONVILLE FL 32216

7071 PHILLIPS HIGHWAY
JACKSONVILLE FL 32216-6039

C0080044



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

5292 Soutal Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Jacksonville FL

4. FEI Number

59-3183488

Applied For

Not Applicable

Zip

Country

Zip

Country

32208-3413

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ELKINS, HAROLD
6061 MERRILL ROAD
JACKSONVILLE FL 32211 32217

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

32217

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME V
STREET ADDRESS PATEL, BHARAT
CITY-ST-ZIP 8411 BLANDING BLVD
JACKSONVILLE FL

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

TITLE ☐ Delete
NAME P
STREET ADDRESS PATEL, MAHENDRA
CITY-ST-ZIP 7071 PHILLIPS HIGHWAY
JACKSONVILLE FL

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

TITLE ☐ Delete
NAME T
STREET ADDRESS BHAKTA, HARISH
CITY-ST-ZIP 8411 BLANDING BLVD
JACKSONVILLE FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIG. of Harish Bhakta
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00
Date

904 764 5691
Daytime Phone #

CR2E034 (9/99)