FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 07 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

l '	MENT # P9300 PETROLEUM CORP.	0037485 (8	5)						
Principal Place of Business Mailing Address						{			
4524 GUN CLUB RD SUITE 212 WEST PALM BEACH FL 33415 4524 GUN CLUB RD SUITE 212 WEST PALM BEACH FL 33415 WEST PALM BEACH FL 3			L 33415	3415		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
ĺ						05/19/1993			
	Place of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
21	H =4=	Suite, Apt. #, etc.				65-0422153		ot Applicable	
Suite, Apt	#, 9 (C.	27				5. Certificate of Status Desired		Additional equired	
City & Sta	ite	City & State				6, Election Campaign Financing		May Be	
23		28	28			Trust Fund Contribution		to Fees	
Zip	Country	Zip	Cour	itry		8. This corporation owes or has paid the c			
24	25	29	30			Personal Property Tax due June 30.		No	
	g, Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Registered	i Agent		
REICHEL, WILLIAM B 10259 ALLAMANDA CIRCLE SUITE 800				82	L	ress (P.O. Box Number is Not Acceptable)			
P#	alm Beach Gardens FL 33410)		83	ı				
			Ī	B4	City	FI	85 Zip	Code	
office or agent 1	to the provisions of Sections 607.05 registered agent, or both, in the Stal am familiar with, and accept the oblig standard transfer typed or printed name of registered ages	gations of, Section 607,0505,	Florida Statı	ites	3. 	coration submits this statement for the purpose ion's board of directors. I hereby accept the appropriate the statement of the purpose of the statement of the statem	of changing i	lls registered registered	
12.		ND DIRECTORS	13.	_		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D D D D D D D D D D D D D D D D D D D	☐ DELETE	1.1 100				Change	Addition	
NAME	REICHEL, WILLIAM B 4524 GUN CLUB RD #212		1.2 NAI		1000500				
STREET ADDRESS CITY-ST-ZIP	WEST PALM BEACH FL 334	15	1.3 STF 1.4 CIT		ADDRESS				
TITLE	TIEST THEM BENOTTE SOI	DELETE	2.1 [17]		1-21		Change	Addition	
NAME			2.2 NA		1			_	
STREET ADDRESS	1		2.3 STF	EET	ADDRESS			l	
CITY-ST-ZIP			2.4 01	<u>Y</u> -S	31 - ZIP				
TITLE		☐ DELETE	3.1 1 1	.E			Change	Addition	
NAME			3.2 NA/	Æ	ļ				
STREET ADDRESS			3.3 STF	EET.	ADDRESS				
CITY-ST-ZIP		Direc	3 4. Cli		T-ZiP		TT 05	T Address 1	
TITLE	1	☐ DELET E	4.1 117				Change	Addition	
NAME OXOCCA ADDRESS	1		4. 2 NA		4 D CODE CO				
STREET ADDRESS CITY-ST-ZIP			4.3 STF		ADORESS				
TITLE		DELETE	5.1 TITE		1-217		Change	Addition	
NAME	:		5.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 CIT						
TITLE		☐ DELETE	6.1 T(T)				Change	Addition	
NAME			6.2 NA	Æ	}				
STREET ADDRESS	1		6.3 STR	EET (ADDRESS			i	

CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 true fee 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, of on an attachment with an address.