


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000052961 1. Entity Name PETRINVEST, INC.	
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Principal Place of Business 1714 CAPE CORAL PARKWAY CAPE CORAL, FL 33904	Mailing Address 1714 CAPE CORAL PARKWAY CAPE CORAL, FL 33904
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01172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0486283	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ROOSA, RICHARD V 1714 CAPE CORAL PARKWAY CAPE CORAL, FL 33904

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IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Trust Fund Contribution. Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAUMANN, DIETHELM POSTFACH 220 8027 ZURICH SWITZERLAND,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORN, P POSTFACH 220 8027 ZURICH SWITZERLAND,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SENN, H POSTFACH 220 8027 ZURICH SWITZERLAND,
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03/14/05-80052-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Diethelm Baumann</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	3/9/05 <small>Date</small>	01 202 70 10 <small>Daytime Phone #</small>