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Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000078058 (3)

1. Corporation Name

RAHMAN OIL INCORPORATED

Principal Place of Business

5000 N. STATE ROAD 7  
TAMARAC FL 33319

Mailing Address

5000 N. STATE ROAD 7  
TAMARAC FL 33319-3316

3. Date Incorporated or Qualified

11/05/1993

3a. Date of Last Report

04/16/1996

2. Principal Place of Business

2a. Mailing Address

4999 N STATE RD 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

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29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CENTOLA, DAVID D ESQ.  
125 HYPOLUXO ROAD  
HYPOLUXO FL 33462

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	PD	DELETE
NAME	PATWARY, MOHAMMED S	
STREET ADDRESS	18690 SHAUNA MANOR DRIVE	
CITY- ST- ZIP	BOCA RATON FL 33496	
TITLE	STD	DELETE
NAME	PATWARY, DEBORAH A	
STREET ADDRESS	18690 SHAUNA MANOR DRIVE	
CITY- ST- ZIP	BOCA RATON FL 33496	
TITLE	D	DELETE
NAME	PATWARY, MOHAMMAD M	
STREET ADDRESS	18690 SHAUNA MANOR DRIVE	
CITY- ST- ZIP	BACO RATON FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY- ST- ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY- ST- ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY- ST- 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: Mohammed S. Patwary Date: 4/21/97 Daytime Phone: 954-733-8875  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR