J-14-4) B- 2126 ILE NOW: FILING FEE AFTER MAY 1 I

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000078617 (6)

EUREKA GAS MARKET, INC.

13401 S.W. 184TH ST.

MIAMI FL 33177

Principal Place of Business Mailing Address 13401 S.W. 184TH ST. 13401 S.W. 184TH ST. MIAMI FL 33177 MIAMI FL 33177-2523 3. Date Incorporated or Qualified 3a. Date of Last Report 11/15/1993 04/22/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address 1941 SW 139 COUNT 65-0454320 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 0/0. JUAN A. 22 MARRYRO Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing F/A MIAMI 23 28 **Trust Fund Contribution** Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 33175 25 Yes 🗌 No 24 Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARRERO, JUAN A

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.

83 R4 Street Address (P.O. Box Number is Not Acceptable)

SIGNATURE Signature, typict or printed partie of registered agent and tice if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition ROTHMAN, DAVID MAME 1.2 NAME 15060 S.W. 134 AVE. STREET ADORESS 1.3 STREET ADDRESS MIAMI FL 33175 CITY-ST-ZIE 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE MARRERO, JUAN A NAME 2.2 NAME 1961 S.W. 139 CT. STREET ADORESS 2.3 STREET ADDRESS MIAMI FL 33175 CITY-ST-ZIF 2. 4 CITY - ST - ZIP DELETE HILE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY-ST-ZIF 3.4. CITY - ST - ZIP DELETE Change THLE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY: ST-ZIF DELETE TITLE 5.1 TITLE Change Addition MALIE 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY - ST - ZIP CITY - ST - ZIF DELETE THEF 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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 required to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if engaged, or on an attachment with an address.

SIGNATURE:

SIGNATURE M OFFICER OR DIRECTOR

FILED

Feb 19 1997 8:00am

Secretary of State

Applied For

Zip Code

Not Applicable