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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P93000084196 (3)

ATLANTIC/UNIVERSITY GAS, INC.

FILED Feb 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
CORAL SPRIN	NGS FL 33071		7001 N.E. 8TH DRIVE BOCA RATON FL 33487			
US					DO NOT WRITE IN THI 3. Date Incorporated or Qualified	S SPACE
					12/09/1993	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		[26]			65-0451677	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc	1		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
[Zip	Country	Z(ρ)	Count	try	8. This corporation owes or has paid the d	
24	25 29 30		30		Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registers	d Agent
	RMAN, WILL J		[8	1 Name		
1	D1 N.E. 8TH DRIVE		8	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
BO	CA RATON FL 33487		l _a	3	· · · · · · · · · · · · · · · · · · ·	
			8	4 City	F	85 Zip Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida, Such change was authorized by 					orporation submits this statement for the purpose oration's board of directors. I hereby accept the a	of changing its registered ppointment as 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.						
	Stignature, typied or printed name, of required age		OTL Registered A	gent signature re	equired when reinslating) DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME	PDST	DELETE	117016	1		Change Addition
STREET ADDRESS	HARMAN, WILL 7001 NE 8TH DR.		1.2 NAM	ET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 City	ŀ		
TITLE		DELFTE	21 TITLE			☐ Change ☐ Addition
NAME			2.2 NAM	E		
STREET ADORESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	**			-ST-ZIP		
TITLE		☐ DELETE	3 1 TOLE	- 1		☐ Change ☐ Addition
NAME CTREET ADDRESS			3.2 NAMI			
STREET ADDRESS CITY-ST-ZIP			3.3 STRE 3.4. CITY	ET ADDRESS		
TITLE	TALLIAN BUT TO THE TALL THE TA	DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	1		
STREET ADDRESS			4.3 STREE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS				ET ADDRESS		•
CITY-ST-ZIP TITLE		DELETE	5.4 CITY- 6.1 TITLE			Change Addition
NAME			6.2 NAME			Li cuanda (Ti woolilon
STREET ADDRESS				ET ADDRESS		
			0.0 0.110			

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 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 alta-chement with an address

1/1/98

5/1000/1985