FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



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

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|-------------------------------|--|--|----------------------------------|-------------|--|---|------------------------------------|
| 1. Corporatio | MENT # P940 EN OIL, INC. | 00004965 (7 | ") | | i ibāliādi itā idni biāla barn a | 1181 86 114 88 114 8 | BÍÍS BIÐAR JBAIR BAIRI BEIL IR |
| Principal Place | a of Business | ************************************** | | | | | |
|] | 80TH AVE | Maling Address | | | | | |
| | O FL 33067 | 5911 NW 60TH AVE PARKLAND FL 33067 | | | | | |
| | | | | | 3. Date incorporated or Qualified 01/21/1994 | | of Last Report 5/01/1995 |
| 2. Principal P | lace of Business | 2a. Malling Address | | | 4. FEI Number 65-0463870 | | Applied For |
| Suite, Apt. | #, etc | Suite, Apt. #, etc. | | ···· | | | Not Applicabl \$8.75 Additional |
| City & Stati | | 27 | | | 5. Certificate of Status Desired | | Fee Required |
| 23 | e | City & State | | | 6. Election Campaign Financing | | \$5.00 May Be |
| Zip | Country | Zip | Country | ···· | Trust Fund Contribution 8. This corporation has liability for i | | Added to Fees |
| 24 | 25 | | 30 | | Florida Statutes Yes | No | |
| | 9, Name and Address of Curre | ent Registered Agent | 81 | iame | 10. Name and Address of New R | egistered A | gent |
| RAYN | or, gene s | | | | | | |
| | NW BOTH AVE | | 82 5 | Street Addr | ess (P.O. Box Number is Not Acceptab | le) | |
| PARKI | AND FL 33067 | | 83 | | ······································ | | |
| | | | 84 (| | | | 85 Zip Code |
| 11 Director | to the error delegant (Cont | | | • | ation subroits this statement for the purp | FL | 1 1 ' |
| SIGNATURE | Signature typed or traited have of papereses up- | | Fugitalist Agertas | | <u>.</u> | 31,543 | |
| TITLE | PVST | DELETE | 13. | 1 | ADD:TIONS/CHANGES TO OFFI | | DIRECTORS IN 12 Change |
| NAME | raynor, gene s | | 1.2 NAME | ļ | | | Onlinge Applitor |
| STREET ADDRESS | 5911 NW 60TH AVE | | 1 3 STREET ADD | nress | | | |
| DITLE | PARKLAND FL 33067 | Fig for the | 14 CHY - SI - Z | ř | | | |
| NAME | ! | DELETE | 2.11//// | | | | Change Addition |
| STREET ADDRESS | | | 2.3 STREET ADD | IRESS | | | |
| CITY+ST-7iP | | _ | 2.4 CITY - \$1 - Z | | | | |
| TITLE | | ☐ DELETE | 3 1 TITLE | | | | Change Addition |
| NAME PEOPLE ADDRESS | | | 3.2 NAME | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | 3.3 STREET AD | | | | |
| TITLE | | DELETE | 3.4 CITY - 51 - 71 4. 1 TITLE | <u>'</u> | | | Change Addition |
| NAME | | | 4 2 NAME | | | ຄ | Change |
| STREET ADDRESS | | | 4.3 STREET ADD | RESS | | | |
| CITY - ST - ZIP | <u> </u> | FD FALLS | 4.4 CiTy - \$1 - Zi | P | | | |
| TITLE NAME | | ☐ DELFTE | 5 1 THE | | | | Change Addition |
| STREET ADDRESS | | | 5.2 NAME 5.3 STREE ADD | DLUC | | | |
| CITY - ST - ZIP | | | 54 CITY - 11 - 21 | | | | |
| TITLE | | ☐ DELE LE | € 1 TIFLE | | | | Change Addition |
| NAME | | | € 2 NAME | | | _ | |
| STREET ADDRESS | | | 63 STREET ADD | RESS | | | |

6.4 CI*x - S* - 7IP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4). 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 emplowered 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:

CHY-ST ZP

THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR 1124/85 (954) 345-3453