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PROFIT
CORPORATION
ANNUAL REPORT
1997

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400007537 (1)

ROSADO PROPANE SALES & SERVICE, INC.

Principal Place of Business Mailing Address 2410 N.E. 4TH AVENUE 2410 N.E. 4TH AVENUE POMPANO BEACH FL 33064 POMPANO BEACH FL 33064-5402 3. Date Incorporated or Qualified 3a. Date of Last Report 01/21/1994 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0460737 Not Applicable Sulte Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation has liability for intengible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ROSADO, MANUEL 2410 N.E. 4TH AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 **POMPANO BEACH FL 33064** 83 84 City Zip Code 85 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE Change ___ Addition TITLE 1.1 DILE ROSADO, MANUEL NAME 1.2 NAME 3760 NE 12TH AVE STREET ADDRESS 1.3 STREET ADDRESS POMPANO BCH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 THLE ___ Change Addition ROSADO, FELIX NAME 2.2 NAME 2201 NW 20TH CT. STREET ADDRESS 2.3 STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP 2. # CITY - ST- 7IP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CRY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7IP DELETE Change Addition TITLE 5.1 TOLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7IP DELE16 Addition TITLE 6.1 TITLE

44. 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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.

6.2 NAME

6.3 STREET ADDRESS 6.4 CHTY-ST-7IP