SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P94000069436 (1)

BP ENERGY, INC.

Principal Place of Business 3202 FOX SQUIRREL LANE VALRICO FL 33594

Mailing Address

3202 FOX SQUIRREL LAME VALRICO FL 33594

**FILED** Jul 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

								3. Date incorporated or Qualified	
								09/21/1994	
2. Principal Place of Business			2a. Mailii	2a. Mailing Address				4. FEI Number	Applied For
21			26	26				59-3268523	Not Applicable
Suite, Apt.	#, etc.	Suite 27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	е	City	City & State				6. Election Campaign Financing	\$5.00 May Be	
23		28	28				Trust Fund Contribution	Added to Fees	
Zip	Country Zip				Cou	ntry		8. This corporation owes or has paid the curr	
24	25 29				30	30		Personal Property Tax due June 30. X Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
pustis, <b>ro</b> bert r						81 Name			
3202	FOX SQU				82	Street A	reet Address (P.O. Box Number is Not Acceptable)		
VALI	RICO FL 33								
						83			
						84	City		85 Zip Code
						اتا	City	FL	21p 0008
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.								ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	<b>DPST</b> DELETE					1.1 TITLE			Change Addition
NAME	PUSTIS, JEAN MARIE					1.2 NAME		· ·	
STREET ADDRESS	3202 FOX SQUIRREL LANE					1.3 STREET ADDRESS			li
CITY-ST-ZIP	VALRICO FL 33594					1.4 CITY-ST-ZIP			į i
TITLE	V			DELETE	2.1 TII				Change Addition
NAME	PUSTIS, I	Robert R			2.2 NA	ME		_	
STREET ADDRESS		SQUIRREL LANE			REET.	ADDRESS	<del>}</del>	Ĭ.	
CITY-ST-ZIP	VALRICO					2.4 CITY-ST-ZIP			
TITLE				DELETE	3,1 711				Change Addition
NAME					3.2 NA		\	_	
STREET ADDRESS							ADDRESS	}	1
CITY-ST-ZIP					3.4 CI	-	}		
TITLE				DELETE	4.1 70				Change Addition
NAME !				L DECETE	4.2 NA		-	 	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP					4.4 CIT				
TITLE				DELETE	5.1 TIT		<del>-</del> "	Г	Change Addition
NAME				□ ] DECE IE	5.2 NA				Change [ Add([D)]
STREET ADDRESS							ADDRESS		1
CITY-ST-ZIP TITLE			· · · · · · · · · · · · · · · · · · ·	DOLLETE	5.4 CIT 6.1 TIT		· EIP	<u> </u>	Change Addition
}	\$			DELETE	6.2 NA		-	 	Change Addition
NAME							4000000		
STREET ADDRESS					6.3 ST	KEBTA	ADDRESS		<u> </u>

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 an attachment with an address.

SIGNATURE:

Robert R. Pushs

888-276-3749 813 689 6984