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

PROFIT CORPORATION ANNUAL REPORT

1999

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000069436

BP ENERGY, INC.

Principal Place of Business
3202 FOX SOMIRREL LANE

Mailing Address

3202 FOX SOUIRREL LANE VALRICO PL 33594

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90092 008 ***158.75



VALRICO FL 33	594	VALRICO PL 33594	DO NOT WRITE IN THIS SPACE				
	•	,		3. Date Incorporated or Qualifed			*
				09/21/1994		•	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number		Ap	plied For
21 3407	Fox Souirre Lu	26 P.O. BOX /	'889 ·	59-3268523		No	t Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	DS.	\$8.75 /	I
27				3. Certificate of States Desired		Fee Re	equired
City & State City & State			1 .	6. Election Campaign Financing		\$5.00	
23 VA 12	ico FloniDA	28 VAIRICO, F.	loni DA	Trust Fund Contribution		Added t	to Fees
Zip	Country	Zip	Country	8. This corporation owes the curre			ref.
24 335 9	4 " 25 U.S.A	29 33575-1889 30	USA	Personal Property Tax.		Yes	25No
	9. Name and Address of Current	Registered Agent	94 Nome (=	10. Name and Address of New R			Politica and
PUSTIS, ROBERT R							
				dress (P.O. Box Number is Not Accepta	ble)		
VALE	NOO EL AGEGA	BUX 1887					
VALRICO FL 33594 83 34071				Fox Souirrel LAN	O		į
	. *. *	**	84 City) /	1			Code
			VA	Inico	FL		595
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 Road or pricing page of projected page of projected agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
	Signature, typed or printed name of registered agent		gistered Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFI	ICERS AND	DIRECTO	DRS IN 12
12.	OFFICERS AND	DIRECTORS DELETE	1.1 TITLE	ADDITIONS/GITANGES TO GIT		Change	Addition
TITLE		L.J DECETE	1.2 NAME		-	_ `	_
NAME	PUSTIS, JEAN MARIE 3202 FOX SQUIRREL LANE		1.3 STREET ADDRESS				-~
STREET ADDRESS							
CITY-ST-ZIP TITLE	VALRICO FL 33594	□ DELETE	1.4 CITY-ST-ZIP		Г	Change	Addition
	PUSTIS, ROBERT R		2.2 NAME		_	_ ,	_
NAME	3202 FOX SQUIRREL LANE		2.3 STREET ADDRESS	many of the same o			
STREET ADDRESS	VALRICO FL 33594		2.4 CITY-ST-ZIP				
CITY-ST-ZIP	VALNICO FL 33354	☐ DELETE	3.1 TITLE			Change	Addition
TITLE		~ r==	3.2 NAME		_	-	
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STREET ADDRESS			3.4. CITY-ST-ZIP				1
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4.2 NAME			-	
			4.3 STREET ADDRESS				Ì
STREET ADDRESS			4.4 CITY-ST-ZIP				ĺ
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		[Change	☐ Addition
NAME			5.2 NAME			_ •	_ [
			5.3 STREET ADDRESS	•			ì
STREET ADDRESS			5.4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			Change	Addition
			6.2 NAME		-	_ •	_
NAME			6.3 STREET ADDRESS				
STREET ADDRESS			U.S GITTLE : ADDITLOS				J

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 attachment with an address, with all other like empowered.

SIGNATURE:

LADING AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ADDING AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3R2E034 (11/98