FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995 AMEND

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

APPROVED AND FILED

95 APR 11 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P94000091034

1. Corporation Name

POINT ROYALE TEXACO, INC.

Principal Place of Business — Mailing Address

19199 SOUTH DIXIE HIGHWAY
MIAMI, FLORIDA 33157

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 94 DEC 16 1994	3a. Date of Last Report
4. FEI Number: 65-0507256	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 SAME AS ABOVE	26 SAME AS ABOVE
22 Suite, Apt. #, etc	27 Suite, Apt. #, etc
23 City & State	28 City & State
24 Zip / 25 County	29 Zip / 30 County

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: ANDREW SHAM SIEW
82 Street Address (P.O. Box Number is Not Acceptable): 19199 SOUTH DIXIE HIGHWAY
83
84 City: MIAMI FL 85 Zip Code: 33157

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. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	1.1 TITLE	PRESIDENT — XX Change ☐ Addition
NAME	Andrew Sham Siew	1.2 NAME	RAMRAJ SEWNARINE
STREET ADDRESS	10460 SW 148 AVE Miami Fl	1.3 STREET ADDRESS	17000 SOUTH DIXIE HIGHWAY
CITY ST ZIP		1.4 CITY ST ZIP	~~MIAMI, FLORIDA 33157~~
TITLE	Vice President	2.1 TITLE	VICE PRESIDENT — ☐ Change ☒ Addition
NAME	Andrew Siew	2.2 NAME	19199 SOUTH DIXIE HIGHWAY
STREET ADDRESS	~~10440 SW 148 Ave Address~~	2.3 STREET ADDRESS	MIAMI, FLORIDA 33157
CITY ST ZIP	Miami Fl 33176	2.4 CITY ST ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	4/11

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)(k), 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.

SIGNATURE: ______ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 3/14/95 Date — 305-251-1263 Daytime Phone #