

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

FILED
May 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000022296 (4)

1. Corporation Name:

GULF COAST OIL, INC.



Principal Place of Business

Mailing Address

301 NORTH WESTSHORE BLVD.
TAMPA FL 33609

301 NORTH WESTSHORE BLVD.
TAMPA FL 33609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/20/1995

4. FEI Number

59-3303954

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 4601 W. KENNEDY BLVD

26 4601 W. KENNEDY BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 202

27 SUITE 202

City & State

City & State

23 TAMPA FL

28 TAMPA FL

Zip

Country

Zip

Country

24 33609

25 US

29 33609

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROEDL, LAWRENCE
301 N WESTSHORE BLVD
TAMPA FL 33609

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4601 W. KENNEDY BLVD

83

SUITE 202

84

City

TAMPA

FL

85

Zip Code

33609

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 ☐ DELETE

P
NAME CONVEY, MICHAEL F
STREET ADDRESS 301 NORTH WESTSHORE BLVD.
CITY-ST-ZIP TAMPA FL 33609

TITLE ☐ DELETE

S
NAME CONVEY, DOLORES R
STREET ADDRESS 301 N WESTSHORE BLVD
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

T
NAME ROEDL, LAWRENCE
STREET ADDRESS 301 N WESTSHORE BLVD
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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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 in an attachment with an address.

CR2E034 (10/97)