2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000038315

Title:

Name:

Address:

City-St-Zip:

Entity Name: INTERNATIONAL FUEL, INC

FILED Mar 07, 2005 Secretary of State

Entity Nan	ne: INTERNA	HONAL FUEL, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3685 S.W. MIAMI, FL			1492 S. DIXIE HWY CORAL GABLES, FL	33146	
Current Ma	ailing Address	s:	New Mailing Address	New Mailing Address:	
3685 S.W. MIAMI, FL			1492 S. DIXIE HWY CORAL GABLES, FL	33146	
FEI Number:	65-0588549	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
ESCOBAR 3685 S.W. MIAMI, FL	8TH ST.		ESCOBAR, MANUEL 401 SW 8 ST MIAMI, FL 33130 L	JS	
The above in the State		ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				03/07/2005	
	Electroni	c Signature of Registered Age	ent	Date	
Election Carr	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP () ESCOBAR, MAN 3685 S.W. 8TH S MIAMI, FL 3313	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () ESCOBAR, EDU 3685 SW 8TH S MIAMI, FL 3313	Т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () DIAZ, MARTA 3685 SW 8TH S' MIAMI, FL 3313		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () ESCOBAR, MAR 3685 SW 8TH S' MIAMI, FL 3313	Т	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: EDUARDO ESCOBAR VP 03/07/2005

() Delete

ESCOBAR, MANUAL

3685 SW 8 STREET

MIAMI, FL 33135

() Change () Addition