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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # P95000048341

GIBSONTON BP STATION INC.

Principal Place of Business

TOOLS HIS HAVY AS S

Mailing Address

10916 US HWY 41 S

FILED May 14 1997 8:00am Secretary of State



GIBSONTON FL			GIBSONTO	N FL 33534-47	10								
							÷				ite of Last Report		
2. Principal Pl	lace of Busines:	S	2a. Mailing	2a. Mailing Address				4. FEI Number			Applied For		
21			26	26				65-0033932 Not Ap			Applicable		
Suite, Apr. #, etc.			Suite, /	Suite, Apt #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	ខ	-	City & 28	State				Election Campaign Financing Trust Fund Contribution			.00 k		
Zip	25	Country	Zip	······································	Count	iry		8. This corporation has liability for Florida Statutes	Intangible Yes		der s.	199.032,	
		d Address of Curr		gent	1			10. Name and Address of New Re					
YOU	JNIS, PIERE		······································		8	11	Name				,,		
1091	16 US HWY 4				8	12	Street Add	ress (P.O. Box Number is Not Acceptate	ole)			************	
GIBS	SONTON FL 3	13334	••		8	13	.,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************		
					6	14	City		FL	85	Zip C	ode	
11 Pursuant	lo the recogning	of Sections 607 O	502 and 607 1508	Florida Statu	ites the abo		a-named cor	poration submits this statement for the	uroose o	chanc	aino its	registered	
office or n agent. La	egistered agent m familiar with,	or both, in the Sta and accept the obl	te of Florida. Such igations of, Sectio	change was n 607.0505, F	authorized lorida Statut	by les	the corpora	tion's board of directors. I hereby acce	pt the app	ointme	nt as r	egistered	
SIGNATURE	Storature, typed or p	rinted name of registered s	gent and little if applicab	ile (NO	TE: Registered A	Age/	int signature requ	ired when reinstating)	DATE				
12.			ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRE	CTORS	IN 12	
TITLE	Р		***************************************	DELETE	1,1 TITLE	E				Ch	ange	Addition	
NAME	YOUNIS, PI	ERE			1,2 NAM	ŧE	:						
STREET ADDRESS	2201 GADV				1,9 STRE	EET :	ADDRESS						
CITY - S1 - ZiP	VALRICO F				1.4 CITY	/-SI	7-ZIP						
TITLE	7,0,00			DELETE	2.1 TITLE					Ch	ange	Addition	
NAME					2.2 NAM	1E	•						
STREET ADDRESS							ADDRESS						
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THE				DELETE	3.1 TITL				· · · · · · · · · · · · · · · · · · ·	☐ Ch	ange	Addition	
NAME:					3.2 NAM	Æ							
STREET ADDRESS							ADDRESS						
CITY-S1-7IP					3,4. CIT)								
11TLE		***************************************		DELETE	4.1 TITU		:		,	Cr	ange	Addition	
NAME					4. 2 NAA	VÆ							
STREET ADDRESS							ADDRESS						
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104F				DELETE	5.1 TITL					☐ Cr	1ange	Addition	
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CHY-ST-ZIP	<u> </u>			DELETE	5.4 CITY 6.1 TITL		וינור			CI	nange	Addition	
TITLE				L- DELLIE			: 1						
NAME }					6.2 NAW								
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP	ļ <u>.</u>				6.4 CITY			40.67/07/81 51-1/1-01				h-	
4.4 Lala basal	by partity that the	a information numb	liad with this filian	done not our	tity for the e	WA	mntion etata	id in Section 119 07/3\/i). Florida Statuti	as I furiba	r cartif	v inai t	na	

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 eath; that an 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: