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

PROFIT~ ' CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000052591

1. Corporation Name

PETROLEUM MANAGEMENT SERVICES, INC.

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90113 008 ***158.75



Principal Place of Business Mailing Address								BILLE ISIBI	i 116) (UUI
1000 N.W. 73RD STREET 1000 N.W. 73RD STREET MIAMI FL 33150 MIAMI FL 33150						DO NOT WRITE IN THIS SPACE			
	,					3. Date Incorporated or Qualifed			
	<u>-</u>					07/05/1995			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Applied For		
11		26	26			65-0640600	Not Applicable		
Suite, Apt.	#, etc	Suite, Apt. #,	Suite, Apt. #, etc.			-5. Certificate of Status Desired		75 Addit	
2		27						e Require	
City & State	. s	— ´	City & State			6. Election Campaign Financing \$5.00 May Be			
3			28			Trust Fund Contribution Added to Fees			
Zip Country		<u> </u>	Zip Country			8. This corporation owes the current year Intangible Personal Property Tax			}
24	25	129	30			Personal Property Tax. Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New	Registered Agent		
IΔN	E, C. SCOTT			["	Name .		· .		
	N.W. 73RD STREET					dress (P.O. Box Number is Not Acceptable)			
	MI FL 33150								
IVHESI	WITE 30100			83					
	,			84	City		FL 85	Zip Code	•
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such chang	e was authorize	ed by	the corporation	oration submits this statement for the on's board of directors. I hereby acce	e purpose of changin	g its regi: is registe	stered ered
SIGNATURE									
	Signature, typed or printed name of registered ager		(NOTE: Registere		t signature required	d when reinstating) ADDITIONS/CHANGES TO OF	DATE SAND DIDE	CTORS	IN 12
12.		D DIRECTORS		TITLE		ADDITIONS/CHANGES TO O	☐ Cha		Addition
TITLE	D LANE C SCOTT)TT 1.2 Nz					_		- }
NAME	LANE, C. SCOTT			STREET ADDRESS					
STREET ADDRESS			1.4 CITY-ST-ZIP					1	
CITY-ST-ZIP	MIAMI FL 33150	□ DE		TITLE	I-ZIP		☐ Cha	nge l'	Addition
TITLE	NHODD CEODCE D			NAME		<u>.</u>			
NAME	KNOPP, GEORGE D 1000 N.W. 73RD STREET				ADORESS				
STREET ADDRESS			1						
CITY-ST-ZIP			CITY-S	11-ZIP		Cha	inge [Addition	
TITLE	_						-	-	
NAME	or the ball of the			TADDSECC					
STREET ADDRESS	MIAMI FL 33150				ADDRESS		4		
CITY-ST-ZIP	D	□ DE		CITY-S	I-ZIP		Cha	inge [Addition
TITLE			I	NAME		Solitt, Michael	Spelling	Cost	rection
NAME	SOLIH, MICHAEL		,		ADDRESS	701111/		7	
STREET ADDRESS					l l				
CITY-ST-ZIP	MIAMI FL 33150	□ DE		CITY-S' TITLÉ	≀-∠IP		[] Cha	nge f	Addition
TITLE				NAME			, ,	J- L	
NAME					ADDRESS				}
STREET ADORESS				CITY-S			• .		
CITY-ST-ZIP		☐ DE		TITLE			Cha	nge F	Addition
TITLE	·			NAME			ب جانب	J- L	
NAME					FADDRESS				ļ
STREET ADDRESS	,	\sim /	√ √ √ √ √ √ √ √ √ √ √ √ √	- INCC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•			1

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 suppliemental 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 trystee 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: