Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90090 047 \*\*\*150.00

## 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 # P95000052726

TITLE

NAME

STREET ADDRESS

1. Corporation	PETROLEUM SERVICES, IN	IC.					
LYMIO	ETHOLLOW OCHTOCO, III						T HERALDRA HIR HALAL BINH BRINF BANK BRINF BRINF BRINF BRINF BURN ARTH HOLL HURKE BRINF HOLL
Principal Place	e of Business	Ma	ailing Address				110000000000000000000000000000000000000
4960 E 10TH COURT 4960 E 10TH COURT							
HIALEAH FL 33013 HAILEAH FL 33013 US US							DO NOT WRITE IN THIS SPACE
US US							3. Date Incorporated or Qualifed
							07/10/1995
2. Principal Place of Business 2a. Mailing Address				ess			4. FEI Number Applied For
21		26	•				65-0592293 Not Applicable
Suite, Apt.	#, etc.	1	Suite, Apt. #,	etc.		-	5. Certificate of Status Desired  \$8.75 Additional
22		27					5. Certificate of Status Desired Fee Required
City & State	e		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				_	Trust Fund Contribution Added to Fees
Zip Country			Zip Cour		country	,	8. This corporation owes the current year Intangible
24	25	29		30		_	Personal Property Tax.   ☐ Yes
•	9. Name and Address of Curre	nt Regis	tered Agent			,	10. Name and Address of New Registered Agent
F1.44	NO 18/11/14/14 O 1/D				81	Name	
EVANS, WILLIAM S JR.					82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
4960 E 10TH COURT					"		
HIAL	EAH FL 33013				83		
					84 City 85 Zip Code		
					04	City	FL   S   S   S   S   S   S   S   S   S
11. Pursuant	to the provisions of Sections 607.05	02 and 6	07.1508, Flori	da Statutes, th	abov	e-named co	orporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	da. Such chan	ge was authori	zed by	the corpora	ation's board of directors. I hereby accept the appointment as registered
_	in familial with and accept the obliga	3110113 01	, 50000011 007.	0000, 1 101,00		,	•
SIGNATURE	Signature, typed or printed name of registered age	nt and title	if applicable.	(NOTE: Regist	ered Age	nt signature requ	uired when reinstating) DATE
12.	OFFICERS AI	ND DIRE	CTORS		3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		D	ELETE 1	1 TITLE		☐ Change ☐ Addition
NAME	EVANS, WILLIAM S JR.			1	2 NAME		
STREET ADDRESS	4960 E 10TH COURT			1	3 STREE	T ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33013			1	4 CITY-S	T-ZIP	
TITLE	V			ELETE 2	1 TITLE		☐ Change ☐ Addition
NAME	EVANS, WILLIAM S SR			2	2 NAME		, ,
STREET ADDRESS	4960 E 10TH COURT			2	3 STREE	TADDRESS	•
CITY-ST-ZIP	HIALEAH FL 33013			2	4 CITY-	ST-ZIP	
TITLE	ST				1 TITLE		- ☐ Change ☐ Addition
NAME	EVANS, KIMBERLY A			3	2 NAME		
STREET ADDRESS	ADOD E ADTH COURT			3	3 STREE	TADDRESS	
CITY-ST-ZIP	HIALEAH FL 33013			3	4. CITY-	ST-ZIP	
TITLE	110 1220 11 7 12 000 10			E1 ETE	1 TITLE	<del></del>	☐ Change ☐ Addition
NAME					2 NAME		
						T ADDRESS	
STREET ADDRESS					4 CITY-S		
CITY-ST-ZIP TITLE			n		1 TITLE	, 1-4IF	☐ Change ☐ Addition
					2 NAME	-	_ <b>_                                  </b>
NAME						TADDRESS	·
STREET ADDRESS					4 CITY-S	i	
CITY-ST-ZIP	İ				- 011 1-0	,, 411	

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 on an attachment with an address, with a other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

NAME OF SIGNING OFFICER OR DIRECTOR

Addition

☐ Change