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 # P95000062716

1. Corporation Name

LPGA OIL & LUBE, INC.

Principal Flace of Busines:	S
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1105 RIDGE WOOD AVENUE HOLLY HILL FL 32114

Mailing Address

1105 RIDGEWOOD AVE. HOLLY HILL FL 32114

Data assessment of Ougliford

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90020 019 ***150.00

DO NOT WRITE IN THIS SPACE	

					08/14/1995	o) Qualifeu		
2. Principal Pl	lace of Business	2a. Mailing Address		. 0.0 -	4, FEI Number			Applied For
21 512	SPOTTED SANDPIPER		SAN	DYIFER	59-3333398			Nct Applicable
Suite, /vpt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status	Desired 🗌		Additional
City & Stat	ONA BEACH, PL.		eac h	oFL.	6. Election Campaign Trust Fund Contrib	- 11		May Be
Zip	Country	Zipalla	Countr	у	8. This corporation ov	ves the current year In		_
24 32119 25 29 32119 3								□No
	9. Name and Address of Current I	Registered Agent		 	10. Name and Addres	s of New Registered	Agent	
É4D	IANA ADAMA IZ		8	Name				
	JAM, ADAM K		82	2 Street Addre				
	SPOTTED SANDPIPER DRIVE						<u> </u>	
DAY	TONA BEACH FL 32114		83	3				
			84	City		F-L	85 Zip	Code
office or r	to the provisions of Sections 607.05(2) egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was aut	horized by	/ the corporatio	oration submits this stater n's board of directors. I h	nent for the purpose o ereby accept the appo	f changing i intment as	ts registered registered
SIGNATURE		ALC YOUR	A.	ent signature required	Lubas semetatis d	DATI		
12.	Signature, typed or printed name of registered age it a OFFICERS AND		13.	ent signature it quired		SES TO OFFICERS A	ND DIREC	TORS IN 12
TITLE	D OF FOLKS AND	DELETE	1,1 TITLE		NEBITION OF BUILD	<u> </u>	Chang	
NAME	FARJAM, ADAM K	_	1.2 NAME					
STREET ADDRESS		:		T ADDRESS				
CITY-ST-ZIP	DAYTONA BEACH FL 32114	•	1.4 CITY-					
TITLE	DATIONA BEACHTE 32114	☐ DELETE	2 1 TITLE	31-Zii			Change	e Addition
NAME			2.2 NAME					
STREET ADDRESS			1	T ADDRESS				
CITY-ST-ZIP			2. 4 CITY-					
TITLE		☐ DELETE	3.1 TITLE				Change	e Addition
NAME			3.2 NAME					
STREET ADD RESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	_			
TITLE		☐ DELETE	41 TITLE				Chang	e Addition
NAME.			4 2 NAME	:				
STREET ADD RESS			4.3 STREE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		_		☐ Chang	e 🗌 Addition
NAME			5.2 NAME					
STREET ADD RESS			5 3 STRE	ET ADDRESS				
CITY-ST-ZIP			54 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				Chang	e Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STRE	ET ADDRESS				
OUTLY OF ZID			64 CITY-	ST-ZIP				

14. Her sby certify that the inform ation supplied with this filing does not qualify for the exemption stated in Section 119.37(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplement annual report is true and a courate 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 all other like empowere 1.

SIGNATURE: