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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000065546 (0) **DOCUMENT #**

INTERNATIONAL GAS MARKETING, INC.

Principal Place of Business Mailing Address 1118 SHIPWATCH DRIVE E P.O. BOX 49276 JACKSONVILLE FL 32225 JACKSONVILLE BEACH FL 32240 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3356220 26 Not Applicable 21 Suite Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PEIRSON, FRANK H 1118 SHIPWATCH DRIVE E. Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32225 83 Zip Code City Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or ponted name of registeric) accordant title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE PEIRSON, FRANK H 1.2 NAME NAME 1118 SHIPWATCH DRIVE E. 1.3 STREET ADDRESS STREET ADDRESS Jacksonville fl 32225 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 51 TITLE 5 2 NAME NAME

14. Thereby 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 attrictment with an address.

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6 3 STREET ADDRESS 64 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

2/11/98

9n4-221-8796

Change

___ Addition

FILED

Feb 18 1998 8:00am

Secretary of State