FILED
Jul 10, 2007 08:00 AM
Secretary of State

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000068164

1. Entity Name
DEB PETROLEUM COMPANY NO. 2, INC.

Principal Place of Business	Mailing Address
2100 LINTON BLVD DELRAY BEACH, FL 33445 US	2100 LINTON BLVD DELRAY BEACH, FL 33445 US

03062007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0608465
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BURNS, DANIEL E
1036 BUCIDA ROAD
DELRAY BEACH, FL 33483

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000767542
07/10/07-80007-020 550.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BURNS, DANIEL E
STREET ADDRESS	1036 BUCIDA ROAD
CITY-ST-ZIP	DELRAY BEACH, FL
TITLE	P
NAME	BURNS, MICHELE P.
STREET ADDRESS	1036 BUCIDA RD
CITY-ST-ZIP	DELRAY BEACH, FL
TITLE	VPST
NAME	SICILIANO, MICHAEL J.
STREET ADDRESS	1233 BREAKERS W BLVD
CITY-ST-ZIP	WEST PALM BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michele P Burns 7/05/07 5612744082
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #