## 2008 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Apr 14, 2008 08:00 Al Secretary of State DOCUMENT # P95000068367 PETROLEUM CORPORATION OF AMERICA, INC. Principal Place of Business Mailing Address 1301 SW 2 ST 1301 SW 2 ST POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 US CR2E034 (11/05) No Cha-P 04092008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0604465 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HRENICK, ANDREW DO NOT WRITE 1301 SW 2 ST POMPANO BEACH, FL 33069 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be U000000893866 $\Box$ Trust Fund Contribution. Added to Fees 04/24/08-80005-007 150.00 OFFICERS AND DIRECTORS 10. TITLE HRENICK, ANDREW NAME STREET ADDRESS 1301 SW 2 ST CITY-ST-ZIP POMPANO BEACH, FL TITLE VP HRENICK, DAVID NAME STREET ADDRESS 1301 SW 2 ST CITY-ST-ZIP POMPANO BEACH, FL 33069 TITLE HRENICK, MARY ANN NAME STREET ADDRESS 1301 SW 2 ST DO NOT WRITE CITY-ST-ZIP POMPANO BEACH, FL 33069 IN THIS SPACE TITLE STREET ADDRESS CITY-ST-7/P TITLE

12. 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

HKENICK 4-10-01 954-401 1764 SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP