SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000073614 (6)

A. & A. PETROLEUM CORP.

Principal Place of Business

Mailing Address

FILED

97 AUG 12 AH 8: 25

ECORETARY OF STATE TALLAMASSEE, FLORIDA



1150 8 4TH ST FT PIERCE FL 34950		1150 S 4TH ST FT PIERCE FL 34950					DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified	3a. Date of	Last Report	
							09/21/1995	08/12/	1996	
. Principal Place of Business			Mailing Address				4. FEI Number		Applied For	
							65-0610065 Not Applicab		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 7	8.75 Additional Fee Required	
City & State			City & State				Election Campaign Financing Trust Fund Contribution	ng \$5.00 May Be Added to Fees		
Zip	Country 25	29	Zip	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
ASAD, MUHAMMAD 1150 \$ 4TH ST FT PIERCE FL 34950					81	Name				
					82	Street Address (P.O. Box Number is Not Acceptable)				
				83						
					84	City		FL 85	Zip Code	
office or reals	ne provisions of Sections 607 stered agent, or both, in the 5 amiliar with, and accept the c	State of Flori	da. Such change was	authorize	d by	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	ourpose of char of the appointm	nging its registered nent as registered	

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE ASAD, MUHAMMAD NAME 1.2 NAME 1150 S 4TH ST STREET ADDRESS 1.3 STREET ADDRESS FT PIERCE FL 34950 1.4 CITY - ST - 21P CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP ****165.00 【****165.00hion DELETE 3.1 TITLE 3.2 NAME STREET DORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 THILE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 51 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE G.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do 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 truster employeered 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.

SIGNATION

@15/97.

2062

Jo whom it may concern.

As per telephone conversation, I have already maidred \$ 165 to your coops, office in early may 97, which I belive is lost in mail.

As per your instructions I am sending a new eneque of the same abronut.

Please disregard The old cheek if your received now.

Thankip you in anticipation

Jone truly met At an Petrosum Cap

Phone # 561-595-0805 fax # 561-595-0864.