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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000085765** (2)

SAHARA PETROLEUM, INC.

Principal Cac 2944 SARNO RI MELBOURNE FI US	0	Mailing Address 2944 SARNO RD. MELBOURNE FL 32935-885	4	3. Date Incorporated or Qualific	ed 3a. Date of Last Report
				11/01/1995	04/23/1996
2. Principat P	lace of Business	2a. Mailing Address		4. FEI Number 59-3345609	Applied For Not Applicable
b		Suite, Apt. #, etc.	**************************************	5. Certificate of Status Desired	\$8.75 Additional
22 27 27			·····		Fee Required
City & State	C	City & State		Election Campaign Financing Trust Fund Contribution	9 \$5.00 May Be Added to Fees
Zιμ	Country	Zip	Country		for intangible tax under s. 199.032,
24	25	[29]	30	Florida Statutes	Yes No
1.00	9, Name and Address of Curren	t Hegistered Agent	81 Name	10. Name and Address of New	Registered Agent
	KIN, DAVID G		oi Name		•
1900 S. HICKORY ST. MELBOURNE FL 32901				ddress (P.O. Box Number is Not Accep	otable)
MELI	BOURINE PL 32801		83		
			64 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050;	2 and 607, 1508, Florida Statut	es, the above-named o	corporation submits this statement for the oration's board of directors. I hereby ac	he purpose of changing its registered
agent. Fa	m familiar with, and accept the obliga	ations of, Section 607.0505, Fk	orida Statutes.	oration's board of directors. Thereby at	cept the appointment as registered
SIGNATURE					
38	Signature type for principlinaria of it gistered age		E: Registered Agent signature i		DA1E
12. Tille	OFFICERS AND	DELETE	13.	SECRE TARY	FFICERS AND DIRECTORS IN 12 Change X Addition
	AYAD B SAAD		1.1 TITLE	ALLAN R CAAD	L. Change Addition
NAME	3436 SADDLE BROOK DR		1.2 NAME	AVAD B. SAAB 3436 SADDLE BROW	ok DR.
STREET ADDRESS	MELBOURNE FL			MELBOURNE, FL 3	12 92H
CHY-ST-ZIP THEF	WELDOONNE I E	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	MELBOURNE/F	Change Addition
NAME	RAOUF S. FARES	E DETECT			. Change L Adollon
	200 INTERNATIONAL DR APT 5	310	22 NAME		·
STREET ADDRESS	CAPE CANAVERAL FL	,,,,	2 3 STREET ADDRESS		
CHY-ST-709 101.6	ON E ONITIVE LE	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		FT percet	32 NAME		CT CHAIRE CT MOURD!
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP					•
101.F		DELETE	3.4. City-St-ZIP 4.1 Title		Change Addition
NAME		DEREIL	4.2 NAME		TT Overige TT Manifold
STREET ADDRESS			4.3 STREET ADDRESS		
CHTY - ST - ZIP			4.4 CITY - ST - ZIP		
Tifut		☐ DELETE	5.1 TITLE.	THE STATE OF THE S	☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-SE-ZIP			5 4 CITY - ST - ZIP		
TATLE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		<u> </u>
STREET ADDRESS			6.3 STREET ADDRESS		
CHY-SI-ZIP			SACITY ST. 7IP		

14. Edo hereby contry 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 attachment with an address. SIGNATURE

FILED

Apr 08 1997 8:00am

Secretary of State