2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P9500002882

ZA

		600 W
Entity Name IMUNA PETROLEUM,	INC.	
OCCIVILIA I #	1 33000032002	

FILED Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90163 042 ***150.00

3001 FOWLER ST. FT. MYERS FL 33901 2. Principal Place of Business 3. Mailing Address AS A BOY 2		ı				
			12		 	
Suite, Apt. #, etc. Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		ES	
City & State City &		City & State		4. FEI Number 65-0623910		Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 A Fee Requi	Additional ired
	6. Name and Address of Current Re	gistered Agent	n ja ja ja seerin	7. Name and Address of New Registere	d Agent	
			Name			
KHAN, MOHAMMED DINAT 3001 FOWLER ST.		Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
ft. Myer	S FL 33901					
			City		Zip Co	ode
	e named entity submits this statement for the tions of registered agent. Signature, typed or grinted name of registered agent and		ng its registered office or reg	gistered agent, or both, in the State of Florida. I an additional and a state of Florida. I an additional additional and a state of Florida. I an additional addition		h, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			Election Campaign Financing Trust Fund Contribution.		.00 May Be led to Fees	
10.	OFFICERS AND DI	RECTORS	11,	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	PRS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	VD ALAM, MD NAZMUL 3001 FOWLER ST. FT. MYERS FL 33901	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Change	e
TITLE : NAME STREET ADDRESS CITY-ST-ZIP	PD ISLAM, MANZURÜL 12693 TORBOY DR BOCA RATON FL 33428	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Khan, Monammed Dinat 18338 Fresh Lake Way Boca Raton Fl 33498	Delete	NAME STREET ADDRESS CITY-ST-ZIP		∵Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition
TITLE NAME		☐ Delete	TITLE NAME STREET ADDRESS		☐ Change	Addition

12. I 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 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 efficer 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

MOHAMEDIUME AUTOURRE

Delete

Change

☐ Addition