


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

FILED
Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 99500009886			
1. Corporate Name CASPIAN FOOD & GAS INC			
Principal Place of Business 1001 West Blue Heron Blvd Riviera Beach, FL 33404		Mailing Address	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 62-0626712	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent Teimour Khangari 1001 Blue Heron Blvd. Riviera Beach, FL 33404		10. Name and Address of New Registered Agent	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I understand, and accept the obligations of, Section 607.0505, Florida Statutes.		81 Name	
SIGNATURE: Teimour Khangari		82 Street Address (P.O. Box Number is Not Acceptable)	
(Signature of the person named as registered agent and, if applicable, the registered agent, is required when reinstating)		83	
DATE: 4-16-97		84 City	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
1001 BLUE HERON BLVD. Riviera Beach, FL	René B. Jorcia VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1001 BLUE HERON BLVD. Riviera Beach FL 33404	Hamid Khatribi Secretary	2.1 TITLE	2.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		3.1 TITLE	3.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		4.1 TITLE	4.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		5.1 TITLE	5.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		6.1 TITLE	6.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 stated 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: Teimour Khangari		4-16-97 561 881 5201	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (9/96)