


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
Feb 01, 2006 08:00 AM

**Secretary of State**  
JAN 20 2006  
BY: *CK #4395*

DOCUMENT # P95000096465  
1. Entity Name  
LUDLAM OIL, INC.



Principal Place of Business      Mailing Address  
6691 SW 40 ST      PO BOX 8546  
MIAMI, FL 33155 US      MIAMI, FL 33255-8546 US

**DO NOT WRITE IN THIS SPACE**



01052006 No Chg-P CR2E034 (11/05)  
4. FEI Number      Applied For  
65-0634002      Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
SARRIA, JORGE A  
8405 SW 56 STREET  
MIAMI, FL 33155

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when relating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00**      9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SARRIA, JORGE A
STREET ADDRESS	8405 SW 56 ST
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

110000414902  
02/11/06-80057-006 158.75  
**DO NOT WRITE IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.  
SIGNATURE: *Jorge A. Sarria*      *JORGE A. SARRIA*      *1/20/06*      *305-274-1446*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytona Phone #