

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000006510

FILED
Oct 15, 2009
Secretary of State**Entity Name:** A&E FUEL CORP.**Current Principal Place of Business:**10059 NW 49TH PL
CORAL SPRINGS, FL 33076 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 9646
CORAL SPRINGS, FL 33075 US**New Mailing Address:**10059 NW 49TH PL
CORAL SPRINGS, FL 33076 US**FEI Number:** 65-0634856**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AVARELLO, JILL
10059 NW 49TH PL
CORAL SPRINGS, FL 33076 US**Name and Address of New Registered Agent:**

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.

SIGNATURE:_____
Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** VPST () Delete
Name: AVARELLO, JILL
Address: P O BOX 9646 N/A
City-St-Zip: CORAL SPRINGS, FL 330759646**Title:** VP () Delete
Name: AVARELLO, JOSEPH
Address: 10059 NW 49 PL.
City-St-Zip: CORAL SPRINGS, FL 33076**Title:** VP () Delete
Name: GIBSON, MICHAEL B
Address: 2654 NW 58 AVE.
City-St-Zip: MARGATE, FL 33063 BR**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP () Change (X) Addition
Name: LAURICELLA, BARBARA
Address: 785 VILLA PORTOFINO CIRCLE
City-St-Zip: DEERFIELD BEACH, FL 33442

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH AVARELLO

VP

10/15/2009

Electronic Signature of Signing Officer or Director_____
Date