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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # P96000007133

1. Corporation Name

INDEPENDENT OIL COMPANY

Principal Place of Business

 % 4316 CURRY FORD ROAD
 ORLANDO FL 32806
 US

Mailing Address

 3010 MYSTIC COVE DRIVE
 ORLANDO FL 32812-5343

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/17/1996

4. FEI Number

59-3362002

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

☒ Yes☐ No

10. Name and Address of New Registered Agent

B1 Name

MAHNAZ PIRZADEH

B2 Street Address (P.O. Box Number is Not Acceptable)

8524 BUCKLEY CT

B3

B4 City

ORLANDO

FL

B5 Zip Code

32817

9. Name and Address of Current Registered Agent

 PIRZADEH, SIROOS
 8524 BUCKLEY COURT
 ORLANDO FL 32817

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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☒ DELETE
NAME	QURESHI, RAHEIL	
STREET ADDRESS	11910 DESMAR COURT	
CITY-ST-ZIP	ORLANDO FL 32821	
TITLE	VP	☒ DELETE
NAME	PIRZADEH, SIROOS	
STREET ADDRESS	8524 BUCKLEY COURT	
CITY-ST-ZIP	ORLANDO FL 32817	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SIROOS PIRZADEH	☒ Change ☐ Addition
1.2 NAME	8524 BUCKLEY CT	
1.3 STREET ADDRESS	ORLANDO FL 32817	
1.4 CITY-ST-ZIP		
2.1 TITLE	MAHNAZ PIRZADEH	☒ Change ☐ Addition
2.2 NAME	8524 BUCKLEY CT	
2.3 STREET ADDRESS	ORLANDO FL 32817	
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)