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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000013184 (2)

CENTRAL FLORIDA GAS, INC.

**FILED** May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address

GAINESVILLE FL 32608		2127 TYMBER HAMMO JACKSONVILLE FL 322				
US		ANONOUNTILLE FL 322	LEU	DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 02/08/1996		
2. Principal Pla	ace of Business	28. Mailing Address		4. FEI Number	Applied For	
21		26 3310 SV	N 35 TH BLVD	59-3359486	Not Applicable	
Suite, Apt. #	i, etc.	Suite, Apt #, etc.			\$8.75 Additional	
22		27	- <u>-</u> -	5. Certificate of Status Desired	Fee Required	
City & State		City & State	<b>-</b> .	6. Election Campaign Financing	\$5.00 May Be	
23		28 GAINESVI		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the o		
24	25	29 32608	30 USA	Personal Property Tax due June 30.	Yes No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registere	1 Agent	
MALIK, ABDUL			Name	81 Name		
3310 SW 35TH BLVD			82 Street Ad	Idress (P.O. Box Number is Not Acceptable)		
GAINESVILLE FL 32608			83			
			<b>84</b> City	F	85 Zip Code	
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 agont, 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						
office or re	glatered agent, or both, in the Sta	ate of Florida, Such change was	s authorized by the corpo	ration's board of directors. I hereby accept the ap	pointment as registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE 3	Signature, typed or printed name of registered	agent and title if applicable (NC	OTE Registered Agent signature re	quired when reinstating) DATE		
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	PS	DELETE	1.1 TITLE		Change Addition	
NAME	MALIK, ABDUL		1.2 NAME		j.	
STREET ADDRESS	3310 SW 35TH BLVD		1.3 STREET ADDRESS			
CITY-ST-ZIP	GAINSVILLE FL		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3 4. CITY - ST - ZIP			
TITLE		☐ DELETE	4 1 TITLE		Change Addition	
NAME			. 4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	* T-7*		
TITLE		☐ DELĘTE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZiP	wife, that the information as malian	I NE AND THE STATE OF	6.4 CITY-ST-ZIP	in Continue 440 07/9Vi). Floring Status at Linkhop		

The boy come the information supplied with this tiling loss not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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 eath; 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 appearment with an address.

11/20/00