SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. "AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000061523 (2) EASTERN PETROCO, INC.					r 1400) Billo (1800 177) (180)
.:					
Principal Place of Business Mailing Address				a sangingar tim their mini matri matri Matri Matri Mila	I (1886 Billi 11888 IIII IBB
2940 SW 154 LANE 2940 SW 154 LANE					
DAVIE FL 33331 DAVIE FL 33331		DAVIE FL 33331		DO NOT WRITE IN THIS S	PACE
					te of Last Report
				07/23/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEL Number	Applied For
21		26		65-0680402	Not Appl cable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the curr	
24	25	29	30	Personal Property Tax due June 30.	Yes 🗍 No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered A	\gent
AMERILAWYER CHARTERED			81 Name	Reynaldo Fernan	dez
343 ALMERIA AVENUE			82 Street Add	fress (P.O. Box Number is Not Acceptable)	<i></i>
CORAL GABLES FL 33134			83 29 (40 SW 154 LAN	e
			84 City	antio El	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpora				poration submits this statement for the purpose of	changing its registered
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 a septit the obligations of, Section 807.0505, Florida States.					
SIGNATURE	Rechardo M	Druguet.	Procide	61'	1- 1997
	Signature, typed or printed name of registered po		ti: Registerud Agent signature requ		
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12 Change Addition
TITLE NAME	FERNANDEZ, REYNALDO	[_] brite	1.1 TITLE 1.2 NAME		☐ cliquide ☐ volution
STREET ADDRESS	C/O 2940 SW 154 LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33331		1.4 CITY - ST - ZIP		1
TITLE	VS	☐ DELETE	2.1 TITLE		Change Addition
NAME	Fernandez, Yrelis		2.2 NAME		
STREET ADORESS	C/O 2940 SW 154 LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33331		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		DELETE	3.4. City-ST-ZiP 4.1 Title		Change Addition
NAME			4. 2 NAME	'	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Adulition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Lorette	5.4 CITY-ST-ZIP		Change Addition
TITLE		DELETE	6.1 TITLE		Change Addition
NAME CERCET ADDRESS			62 NAME		1
STREET ADDRESS			6.3 STREET ADDRESS 6.4 City-St-Zip		
CITY-S1-ZIP			0.4 0111 - 51 - 211		

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 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 in changed or fin an attachment with an address.

FILED

Sep 15 1997 8:00am

Secretary of State