## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000062840

Name:

Address:

City-St-Zip:

FILED Feb 22, 2005 Secretary of State

Entity Name: UNITED PETROLEUM INVESTMENTS, INC. **Current Principal Place of Business: New Principal Place of Business:** 740 NICKLAUS DRIVE MELBOURNE, FL 32940 **Current Mailing Address: New Mailing Address:** 740 NICKLAUS DRIVE MELBOURNE, FL 32940 FEI Number: 59-3394869 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHAH, RAJENDRA R 740 NÍCKLAUS DRIVE US MELBOURNE, FL 32940 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition Name: SHAH, NILESH M Name: SHAH, NILESH M 700 NORTH COURTENAY PARKWAY - #429 4802 SOLITARY DRIVE Address: Address: City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: ROCKLEDGE, FL 32955 Title: DT Title: ( ) Delete () Change () Addition Name: SHAH, RAJESHKUMAR B Name: 6281 CURRY FORD ROAD - #181 Address: Address: ORLANDO, FL 32822 City-St-Zip: City-St-Zip: Title: Title: DPS () Delete () Change () Addition SHAH, RAJENDRA R Name: Name: 740 NICKLAUS DR Address: Address: City-St-Zip: MELBOURNE, FL City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition SHAH, NISHITH M

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

4802 SOLITARY DRIVE

ROCKLEDGE, FL 32955

SIGNATURE: RAJENDRA SHAH **DPS** 02/22/2005