2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 09, 2000 8:00 am Secretary of State DOCUMENT # **P96000078947** GULF ENERGY CORPORATION 05-09-2000 90108 041 ***150.00 Principal Place of Business Mailing Address 625 17TH ST NE 625 17TH ST NE ST PETERSBURG FL 33704-4724 ST PETERSBURG FL 33704 EU0888666 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-3412535 Not Applicable Country \$8.75 Additional Zip Country Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CRONIN, MICHAEL T Street Address (P.O. Box Number is Not Acceptable) 911 CHESNUT STREET **CLEARWATER FL 34616** Zip Code City FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME MAYO, DARRYL K NAME STREET ADDRESS 625 17TH ST NE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL Change Addition ☐ Delete TITLE NAME CHIARO, CASSANDRA M NAME STREET ADDRESS STREET ADDRESS 2416 YORKTOWN APT 407 CITY-ST-ZIP CITY-ST-ZIP **HOUTON TX** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME MAYO, GERALDINE R NAME STREET ADDRESS STREET ADDRESS 1555 BRIGHTWATERS BLVD NE CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL ☐ Delete TITLE Change ☐ Addition TITLE MAYO, ROGER C NAME NAME STREET ADDRESS STREET ADDRESS 1555 BRIGHTWATERS BLVD NE CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

FILED