1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600093409

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90016 021 ***150.00

1. Corporation	n Name PETROLEUM C	ORP.	30 100								
Principal Place of Business Mailing Address									188 HJH BJEN 6	Etia (81) 1861	
601 SE 17TH STREET CAUSWAY FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316											
							DO NOT WRITE IN T	HIS S	PACE		,
							3. Date Incorporated or Qualifed 11/14/1996				
2. Principal P	lace of Business		2a. Mailing Address				4. FEI Number		Apr	olied For	
21			26				65-07078 <u>43</u>		Not	Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fee Rec		
City & Stat	e		City & State				6. Election Campaign Financing	cers.	\$5:00°	May Be	-
23			28				Trust Fund Contribution Added to Fees				
Zip Country			Zip Cou				8. This corporation owes the current year			□ 1	
24 25			9 30				Personal Property Tax.			□No	
	9. Name and Ad	Idress of Current Re	gistered Agent		81	Name	10. Name and Address of New Registe	red A	gent		
NAR	i, dilara										
601 SE 17TH STREET CAUSWAY				82 Street Add			ss (P.O. Box Number is Not Acceptable)				
FORT LAUDERDALE FL 33316						33					
						City		F <u>L</u>	85 Zip C		
office or r	egistered agent, or b	oth, in the State of Fl	d 607.1508, Florida Sta orida. Such change wa of, Section 607.0505,	is authorized	by th	named corpor ne corporation	ation submits this statement for the purpos 's board of directors. I hereby accept the a	e of c ppoint	hanging its i ment as reg	registered jistered	
SIGNATURE	•	, ,					·				i
	Signature, typed or printed	name of registered agent and			Agent s	signature required v			DIDECTO	DO IN 42	8
12.	00	OFFICERS AND DI		13.			ADDITIONS/CHANGES TO OFFICER	5 ANL	☐ Change	Addition	(11/98)
TITLE	PD DELETE								□ Ontarige		7
NAME	NABI, DILARA 18953 ADAGIO	DOME		1.2 NA		, DODESC					8
STREET ADDRESS	BOCA RATON F			1.3 STREET ADORESS					i	CR2E034	
CITY-ST-ZIP	TSD	L 33430	☐ DELETE		1.4 CITY-ST-ZIP 2.1 TITLE				Change	☐ Addition	ြင်
NAME	NABI, HABIBUN				2.2 NAME				_ `		1
STREET ADDRESS	18953 ADAGION	nel/F				ADDRESS					
CITY-ST-ZIP	BOCA RATON F				TY-ST-		,				
TITLE	~ 5.2.2	<u> </u>	DELETE					د.صد	Change	Addition	
NAME			_	3.2 NA						ا بالشنوريكاتات	
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CITY-ST-ZIP				3.4. CI	TY-ST-	- ZIP					
TITLE			☐ DELETE	4.1 TIT	LE			-	☐ Change	☐ Addition	
NAME				4. 2 NA	ME						
STREET ADDRESS				4.3 STI	REETA	ADDRESS			•		
CITY-ST-ZIP				4.4 CIT	Y-ST-	ZIP					
TITLE		<u> </u>	☐ DELETE	5.1 TiT	LE				☐ Change	☐ Addition	
NAME				5.2 NA	ME						i
STREET ADDRESS				5.3 STI	REETA	ADDRESS				į	ı
CITY-ST-ZIP					Y-\$T	ZIP					l
TITLE			DELETE	- 1					Change	Addition	i
NAME	{			6.2 NA							l
STREET ADDRESS						ADDRESS					,
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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 SIG

HABIBUN

NABI

3-19-99

<u>(954) 5ス7-9035</u> Dayline Phore #