Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90023 030 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # POSOCOOGGO7

1. Corporation	JT CREEK PETROLEUM, IN						
Principal Place	e of Business	Mailing Address				h 12110 10116 Altid 121	11 1401 1401
1493 NW 31 AVE POMPANO BCH FL 33069 POMPANO BCH FL 33069							
POMPANO BCH FL 33069 US POMPANO BCH FL 33069 US					DO NOT WRITE IN THIS	S SPACE	
00		•			3. Date Incorporated or Qualifed		
					12/09/1996		
2. Principal P	face of Business	2a. Mailing Address		1.49	4. FEI Number	Appli	ed For
21		26			65-0713169	Not A	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Ad	
22	•	27			5, Controlle of Status Besited	Fee Requ	uired
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 м	
23		28			Trust Fund Contribution	Added to	Fees
Zip 24	Country 25	Zip [Count 30	ry	This corporation owes the current year In Personal Property Tax.]No
24	9. Name and Address of Currer				10. Name and Address of New Registered	1 Agent	
			8	1 Name			
	WDHURY, NAWSHAD			2 Street Add	ress (P.O. Box Number is Not Acceptable)	- ar	
1493 NW 31ST AVE			`	Directria	(i.e. Box range, is net racepass)		
POM	IPANO BEACH FL 33069		8	3			
			-	4 City	11 015 147 148 4 11 MM (2015 01)	85 Zip Co	de e
				' '			
				ent signature require	od when reinstating) DATE	1,199	
12.	,	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		S IN 12
TITLE	D OLIGHBURDY MANGUAD	☐ DELETE	1.1 TITLE			Change	
NAME	CHOWDHURY, NAWSHAD		1.2 NAM	<u> </u>			
STREET ADDRESS	10920 N DANBURY WAY		4.0.0770				
CITY-ST-ZIP TITLE				ET ADDRESS			
	D	□ DELETE	14 CITY	-ST-ZIP		☐ Change	
	D HLIO NIZAMITI	☐ DELETE	1.4 CITY	-ST-ZIP	<u> </u>	☐ Change	Addition
NAME	HUQ, NIZAMUL	☐ DELETE	1.4 CITY 2.1 TITLE 2.2 NAME	ST-ZIP		Change	
NAME STREET ADDRESS	HUQ, NIZAMUL 23180 FLORAWOOD LN	[] DELETE	1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE	ST-ZIP	· .	☐ Change	
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CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP *

SIGNATURE: Z

STREET ADDRESS