## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000064094

**Current Principal Place of Business:** 

Entity Name: 4 NET PETROLEUM, INC.

FILED Feb 08, 2005 Secretary of State

11139 TAMIAMI TRAIL E. NAPLES, FL 34112	11339 TAMIAMI TRAIL E. NAPLES, FL 34113
Current Mailing Address:	New Mailing Address:
11139 TAMIAMI TRAIL E. NAPLES, FL 34112	11339 TAMIAMI TRAIL E. NAPLES, FL 34113
FEI Number: 59-3460579 FEI Number Applied For ( ) FEI N	umber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	
DEONARINE, HANSRAJ 11139 E TAMIAMI TRAIL NAPLES, FL 34113 US	DEONARINE, HANSRAJ 11339 E TAMIAMI TRAIL NAPLES, FL 34113 US
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: HANSRAJ DEONARINE	02/08/2005
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	

## **OFFICERS AND DIRECTORS:**

NAPLES, FL 34109

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

NAPLES, FL 34109

**New Principal Place of Business:** 

Title: () Change () Addition ( ) Delete Title: ROPER, HARRY W Name: Name: 5000 ROYAL MARCO WAY 486 Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: () Delete Title: () Change () Addition DEONARINE, HANSRAJ Name: Name: Address: PICCADILLY CIRCUS Address: NAPLES, FL 34112 City-St-Zip: City-St-Zip: Title: Title: VΡ ( ) Delete (X) Change ( ) Addition Name: RAMTAHAL, RANDOLPH Name: RAMTAHAL, RANDOLPH 119 BLUE RIDGE DR Address: 239 PEBBLE BEACH BLVD Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34113 Title: () Delete Title: (X) Change ( ) Addition AHAMMAD, ZAMI AHAMMAD, ZAMIL Name: Name: 7713 JEWEL LANE, #104 Address: Address: 7713 JEWEL LANE, #104

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.

City-St-Zip:

SIGNATURE: HANSRAJ DEONARINE T 02/08/2005