

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90085 037 ***150.00

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DOCUMENT # P97000067174

1. Entity Name

AMERICAN STAR OIL, INC.



Principal Place of Business

**1300 W AIRPORT BLVD
SANFORD FL 32771
US**

Mailing Address

**740 NICKLAUS DR
MELBOURNE FL 32940
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3460556

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHAH, RAJENDRA
402 HIGHPOINT DR
COCOA FL 32926**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DPS
SHAH, RAJENDRA R
740 NICKLAUS DR.
MELBOURNE FL 32940**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
SHAH, NISHITH
4220 WEST KING ST.
COCOA FL 32926**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
SUNIL, SHAH
158 BLANDING BLVD
ORANGE PARK FL 32073**

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12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

RAJENDRA R. SHAH

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/03

Date

321-690-0807

Daytime Phone #

CR2E034 (10/02)