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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000075327 (1)

CHARBONY OIL INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				<u> </u>	### ##################################
6804 BROOKLINE DRIVE 6804 BROOKLINE DRIVE					
HIALEAH FL 33015 HIALEAH FL 33015				DO MOT MIDITE MAT WE OD A OF	
				DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	3 SPACE
				08/29/1997	
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0779079	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	0	Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 3	Country 0	This corporation owes or has paid the or Personal Property Tax due June 30.	current year Intangible
23	9. Name and Address of Curre		NO	10. Name and Address of New Registere	
CHARBONIEF, JORGE C 81 Name					
1761 6W 136 WAY			62 Street Add	roos (T.O. Boy Number is Not Assentable)	~==·
MIRAMAR FL 33027			BZ Street Addi	ress (P.O. Box Number is Not Acceptable)	
			63		
			84 City		85 Zip Code
			July Oliv	F	L 65 210 00000
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registoric office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registoric					of changing its registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE: ID DIRECTORS	Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AN	VID DIDECTORS IN 19
TITLE	P	DELETE	1.1 TiTLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	CHARBONIER, JORGE A		1.2 NAME		
STREET ADDRESS	6804 BROOKLINE		1.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33015		1.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE		Change Addition
NAME	CHARBONIER, JORGE C		2.2 NAME	4.5	
STREET ADDRESS	1761 SW 136 WAY		2.3 STREET ADDRESS	₩ ¹	!
CITY-ST-ZIP	MIRAMAR FL 33027		2. 4 CITY - ST - ZIP		
TITLE		☐ DELE te	3.1 TITLE		Change Addition
NAME	•		3.2 NAME		•
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		f") AFTERE	4.1 TITLE 4. 2 NAME		Chante Change
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	•		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. Thereby 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.

(95V)