MINORAL DUC OIL OIL DELAND SALIDAN, AND IN DISSOCIATED MIN **PROFIT** CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Jul 22, 1999 8:00 am Secretary of State 07-22-1999 90014 003 ***150.00

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Principal Plac	e of Busines		Mailir	ng Address					i 19519021 if & 1617 1981, obits estit sakk obiti tatas tidal tida kokk sak isot
2665 W 76 STR		•		76 STREET					
HALEAH FL 33	018		HIALEA	H FL 33016					DO NOT WRITE IN THIS SPACE
									3. Date incorporated or Qualified
								ļ	09/18/1997
Principal Place of Business				Za. Mailing Address					4. FEI Number Applied For
11				26					APPLIED FOR 65-079733/ Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required
City & Stat	to.			ity & State	<u> </u>				Election Campaign Financing \$5.00 May Be
City & State				, }-				~ `	Trust Fund Contribution Added to Fees
Zip		Country	Zi	P	Col	intry			8. This corporation owes the current year
4		25	29		30				Intangible Personal Property. Yes No
	9. Name	and Address of Cum	ent Register	ed Agent		81	Name		10. Name and Address of New Registered Agent
MARTIN, LORGE						82		Street Address (P.O. Box Number is Not Acceptable)	
520 SE 3 STREET HIALEAH FL 33013							Street		
							83		
						84	City		■ 85 Zip Code
						1			FL
11. Pursuant	t to the provi	sions of sections 607.05	02 and 607.1	508, Florida Statut	es, the at	XOV8-	named o	orporat	tion submits this statement for the purpose of changing its registered
office or agent. 1 a	registered a am familiar v	gent, or oosn, in the Sta vith, and accept the obl	gations of, se	ection 607.0505, F	lorida Sta	tules	(118 COIP 3.	Or AUO! I	's board of directors. I hereby accept the appointment as registered
SIGNATURE									
12.	Signature, typed	or printed name of registered at OFFICERS A			OTE: Regist	Fred A	Gent signatu	se tedrase	advisor refinitions) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIFLE	\PD			DELETE	1.1 T	TLE			Change Addition
NAME	MARTIN,			<u></u>	1.2 N	AME			
STREET ADDRESS					1.3 \$	REET	ADDRESS	ŀ	
C/TY-ST-Z/P	HIALEAH	FL 33013				TY-ST	-719	26.0	
TITLE				DELETE	2.1 To		i	VP	Change A Accidion
NAME	1				2.2 N		ADORESS	90	00 5E 3 7 0 3 3 3 1 0
STREET ADORESS						ITY-ST		7	10 75 7 A. 33010.
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CITY-ST-ZIP					3.4 C	17-ST	-ZIP	 -	
IIILE				DELETE	4.1 Ti				Change Addition
NAME					4.2 N				
STREET ADDRESS	j					TY-ST	ADDRESS		
city-st-zip Title	+			DELETE	5.1 Tr		-215	<u> </u>	Change Addition
WANE	1			عبداد ب	5.2 N				
STREET ADDRESS							ADORESS		•
CITY-ST-ZIP					5.4 C	TY-ST	-ZXP		
ITILE				DELETE	6.1 11	TLE			Change Addition
VAME	1				6.2 N				
STREET ADDRESS	1				1		ADDRESS		
CITY-ST-ZIP	matific the state	information accoming	th this since of	nee not avoilée for		TY-ST		ganin	n 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of an officer	on this annu- or director of	information supplied water the corporation or the first angel, or on an a	al annual repo receiver or tru	ori is true and acci	rete and	that this	my signa s report a	ture sh is requi	n 1350/33(I), Florida Statutes. I film teening and the minimus. eall have the same legal effect as if made under cath; that I am red by Chapter 607, Florida Statutes, and that my name appears
			- 3	×			E		79-09 7 3178XA
SIGNAT	URE:	SIGNATURE AND TYPED	الرحات	15 OF BIOMPIO 000		TO=	_		7-79-99 305-3623350
		SIGNATURE AND TYPED	JK PRINTED NAI	EL OF SIGNING OFFICE	N OR DIREC	OR			Date Dayting Phone #