

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State
 03-12-2001 90470 049 ***150.00

0635589

DOCUMENT # P97000085971

1. Entity Name

WESTCOAST PETROLEUM COMPANY, INC.

Principal Place of Business

**3006 PALM BEACH BLVD.
 FT. MYERS FL 33916**

Mailing Address

**3006 PALM BEACH BLVD.
 FT. MYERS FL 33916**

2. Principal Place of Business

1510 ESTERO BLVD

3. Mailing Address

8673 LITTLETON ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT. MYERS BEACH, FL

City & State

NORTH. FT. MYERS, FL

Zip

33931

Country

Zip

33903

Country

4. FEI Number

65-0786057

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**RASHID, MUNAF
 3006 PALM BEACH BLVD.
 FT. MYERS FL 33916**

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **PSD RASHID, MUNAF**
 STREET ADDRESS **3006 PALM BEACH BLVD.**
 CITY-ST-ZIP **FT. MYERS FL 33916**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **PSD RASHID, MUNAF**
 STREET ADDRESS **211 S.W 178th Way, Pembrok Pines**
 CITY-ST-ZIP **FL 33029**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M. Munaf

MUNAF RASHID

1/27/01

(941) 332-7590

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)