FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2002 8:00 am Secretary of State **DOCUMENT #** P97000085971 1. Entity Name WESTCOAST PETROLEUM COMPANY, INC. 04-23-2002 90406 007 ***150.00 Principal Place of Business Mailing Address 1510 ESTERO BLVD 8673 LITTLETON RD FORT MYERS BEACH FL 33931 NORTH FT MYERS FL 33903 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0786057 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MUNAF RASHID, MUNAF Street Address (P.O. Box Number is Not Acceptable) 3006 PALM BEACH BLVD. FT. MYERS FL 33916 LITTLETON Zip Code 3<u>3</u>903 FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PSD ☐ Delete TITLE Change CR2E034 (9/01) ☐ Addition RASHID, MUNAF 211 SW 178TH WAY NAME NAME RASHID MUNAF 3941. SW 144+R TERRACE STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP CITY-ST-ZIP MIRAMAR, FL TITI F ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-Z/P TÍTLE Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CJTY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7/2 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

SIGNATURE AND TYPED OR PRINTED NAM

with all other like empowered