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 # P97000091005 (3)

ACTION PETROLEUM OF FLORIDA, INC.

AOTION	TETTIOLEON OF TEORIE	//, INO:					
Principal Place of Business Mailing Address						- A KRONIADA NIA IDAN ARAN BONI BONI BONI BONI BONI AND NA	II BBIII BBIBI BIII JABI
103 WEST MARION AVENUE 103 WEST MARION AVENUE PUNTA GORDA FL 33950 PUNTA GORDA FL 33950				í		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/21/1997	
2. Principal Pi	lace of Business	2a. Mailing Address				4 FEI Number -	Applied For
21 26						65-0791800_	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	⊢			5. Certificate of Status Desired	8.75 Additional Fee Required
City & State	9	City & State	├─¬ '			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Zip Coui 30			8. This corporation owes or has paid the orrent Personal Property Tax due June 30.	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Age	ot .
STRANG, ROBERT A 103 WEST MARION AVENUE PUNTA GORDA FL 33950				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t				84 bove	City -named cor	poration submits this statement for the purpose of ch	
office or re	egistered agent, or both, in the Stat m lamiliar with, and accept the obli	e of Florida. Such change w	as authorize	ed by	the corpora	tion's board of directors. I hereby accept the appoint	ment as registered
SIGNATURE							
				jislered Agent signature required w			<u> </u>
12.			13.			ADDITIONS/CHANGES TO OFFICERS AND DI	Change Addition
TITLE	D DELETE 1.11			ļ		Change Addition	
NAME			AME			Į.	
STREET ADDRESS	DISOLATORE AND SANCE				NDDRESS		Į į
CITY-ST-ZIP TITLE			1.4 C	ITY-ST	- ZIP		Change Addition
NAME						_ Onlingo _ Position	
ì				2.2 NAME 2.3 STREET ADDRESS			}
STREET ADDRESS	BUILTA GODDA FI ASAMA						
CITY-ST-ZIP			3.1 T	CITY-ST	- 211	<u>★</u> 11 □	Change Addition
NAME				3.2 NAME		_	J
STREET ADDRESS	1			3.3 STREET ADDRESS			1
CITY-ST-ZIP	■ **			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 7				Change Addition
MANG				4445			

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 frue 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 contraction or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 if changes or an analyst ment with an address.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

STREET ADDRESS CITY-\$T-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

DELETE

DELETE

Change

Change

Addition

Addition

FILED

Mar 26 1998 8:00am

Secretary of State