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 # P97000091460 (0)

BHAGWANDIN'S PETROLEUM, INC.

Principal Place of Business

FILED May 05 1998 8:00am Secretary of State



Mailing Address 8390 W OAKLAND PARK BLVD 6390 W OAKLAND PARK BLVD SUNRISE FL 33133 SUNRISE FL 33133 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/23/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-92899/2 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name KLINE, CHARLES F 831 N DIXIE HWY 82 Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33460 83 Zip Code 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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTI : Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Change Addition 1.1 MILE **BHAGWANDIN, KAPALDEO** NAME 1.2 NAME 6390 W OAKLAND PARK BLVD STREET ADDRESS 1.3 STREET ADDRESS SUNRISE FL 33133 CITY-ST-ZIP 1.4 CITY - ST - ZIE DELETE TITLE 2.1 TITLE Change Addition **BHAGWANDIN. PARMADAT** NAME 2.2 NAME 6390 W OAKLAND PARK BLVD STREET ADDRESS 2.3 STREET ADDRESS **SUNRISE FL 33133** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 TITLE ☐ Change ☐ Addition NAME 62 NAME STREET ADORESS 63 STREET ADDRESS CITY-ST-ZIP 14. 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 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 coerciver 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.

PROPERT SHAGNAUDIN