




**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90579 038 \*\*\*150.00

<b>DOCUMENT # P97000094341</b>			
1. Entity Name <b>BENGAL PETROLEUM #111, INC.</b>			
Principal Place of Business <b>3801 SOUTH DALE MARRY HIGHWAY TAMPA, FL 33611</b>		Mailing Address <b>1525 NW 3RD ST #14 DEERFIELD BEACH, FL 33442</b>	
2. Principal Place of Business		3. Mailing Address <b>C/O - TEAM MANAGEMENT PO Box 4082</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>PO Box 4082</b>	
City & State		City & State <b>Deerfield Beach, FL</b>	
Zip		Zip <b>33442</b>	
Country		Country <b>Broward</b>	
4. FEI Number <b>65-0805917</b>		Applied For <b>Not Applicable</b>	
5. Certificate of Status Desired <input type="checkbox"/>		Additional Fee Required <b>\$8.75</b>	
8. Name and Address of Current Registered Agent <b>KHAN, MOHAMMED D 10245 LA REINA RD DELRAY BCH, FL 33442</b>		7. Name and Address of New Registered Agent Name <b>MOHAMMED D KHAN</b> Street Address (P.O. Box Number is Not Acceptable) <b>10245 LA Reina Rd</b> <b>Delray Beach.</b> City <b>FL</b> Zip Code <b>33446</b>	
9. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <b>4/22/04</b> <small>DATE</small>	
FILE NOW!!! FEE IS \$190.00 After May 1, 2004 Fee will be \$500.00		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SO KHAN, MOHAMMED D 10245 LA REINA RD DELRAY BCH, FL 33442</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SO MOHAMMED D. KHAN 10245 La Reina Rd Delray Beach FL-33446</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VD AHMED, JALAL 790 EAST BAY DRIVE LARGO, FL 33770</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VD JALAL AHMED 8322 Volusia place Tampa, FL-33637</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P ISLAM, MANZURUL P 12693 TORBAY DRIVE BOCA RATON, FL 33428</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attached page with an address, with all other like empowered.			
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE <b>4/22/04</b> <b>954-520-0822</b> <small>DATE Daytime Phone #</small>	