

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000107358

Entity Name: HEB PETROLEUM, INC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

1900 N. ROOSEVELT BLVD.
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1900 N. ROOSEVELT BLVD.
KEY WEST, FL 33040

New Mailing Address:

17 AMARYLLIS DR
KEY WEST, FL 33040

FEI Number: 65-0801285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESTENOZ, ANTONIO JR
1900 N. ROOSEVELT BLVD.
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

ESTENOZ, ANTONIO JR
1900 N. ROOSEVELT BLVD.
KEY WEST, FL 33040 US

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:

06/23/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESTENOZ, ANTONIO JR
Address: 17 AMARYLLIS DRIVE
City-St-Zip: KEY WEST, FL 33040

Title: VP () Delete
Name: ESTENOZ, ANTONIO III
Address: 2508 FLAGLER AVENUE
City-St-Zip: KEY WEST, FL 33040

Title: S () Delete
Name: PEAGLER, SONIA
Address: 256 MARS LANE
City-St-Zip: KEY WEST, FL 33040

Title: T () Delete
Name: ESTENOZ, CHERYLE
Address: 17 AMARYLLIS DRIVE
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: PEAGLER, SONIA E
Address: 256 MARS LANE
City-St-Zip: KEY WEST, FL 33040

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SONIA E PEAGLER

S

06/23/2009

Electronic Signature of Signing Officer or Director

Date