	PL	EASE READ A	ALL INST	RUCT	IONS BEFC	ORE C	OMPLETI	NG TI	HIS FORM.		
	RPORATION STATEMEN	12 E CL 1 4 E C C	9	Katherir Secretar	TMENT OF ST ne Harris y of State CORPORATIONS	TATE	00 M/	FILE AY -8	ED AM 7:44		
OCUMENT # P98000015078 Corporation Name							/ SECRETARY OF STATE TALLAHASSEE, FLORIDA				
BOMBAY PETROLEUM, INC.							The state of the s				
Principal Office Address 2414 N. FEDERAL HWY 2414				Office Address - N.FEDERAL HWY.			REINS	STA	TEMENT	99	-00
uite, Apt. #		. •	Suite, Apt. #, (Suite, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida 2/16/98				
HOLLYWOOD, FL.				HOLLYWOOD, FL.			5. FEI Number 65-0812587 Applied For Not Applicable				
330	33020 Country USA		3302	20 Country USA			6. CERTIFICATE	OF STATUS		Additional Fe Certificate o	
7. Name and Address of Current Registered Agent											
	Name ALTAF BUDHWANI										
	Street Address 24 Suite, Apt. #, Et		800003278198 -3 -06/06/0001061010 *****900.00 *****901.00								
* 34 (a.)			T		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ນບ					
	City HO	OLLYW001				FL State	33020		_		
I, being a	appointed the regi	istered agent of the abov	ve named corpo	ration, am f	amiliar with and acc	ept the ob	ligations of sectio	n 607.050	5 or 617.0503, F.S.	क्षा कर के सम्मासक अपि १४	
gnature of egistered A	d Agent Nysueu Luseu .							Date _	4/27/00		
RECISTENEU AGENT MUST SIGN											
Names :	and Street Addres	sses of Each Officer and	/or Director (Flo	rida nonpro							
Titles	Name of Officers and/or Directors — —			Street Address of Each Officer and/or Director			- 4	City / State / Zip			
esident	ALTAF BUDHWANI			1450 SE 3rd Ave. #308 Dania, FL 33004				Dania, FL. 33004			
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		er or director or the receivation, the reason for disso									

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR