

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000046406

FILED  
Jan 28, 2004  
Secretary of State

Entity Name: SOUTH FLORIDA FLEET FUELING, INC.

## Current Principal Place of Business:

C/O LEE MANDELL, ESQUIRE  
7400 SW 50 TERRACE #203  
MIAMI, FL 33155

## New Principal Place of Business:

C/O LEE MANDELL, ESQUIRE  
ONE SE THIRD AVENUE, TENTH FLOOR  
MIAMI, FL 33131 US

## Current Mailing Address:

C/O LEE MANDELL, ESQUIRE  
7400 SW 50 TERRACE #203  
MIAMI, FL 33155

## New Mailing Address:

C/O LEE MANDELL, ESQUIRE  
ONE SE THIRD AVENUE, TENTH FLOOR  
MIAMI, FL 33131 US

FEI Number: 65-0930105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANDELL, LEE ESQ  
LEE MANDELL, P.A.  
7400 SW 50 TERRACE #203  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

MANDELL, LEE ESQ  
ONE SE THIRD AVENUE  
TENTH FLOOR  
MIAMI, FL 33131 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: LEE MANDELL

01/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: JACOBSON, HARVEY  
Address: PO BOX 350430  
City-St-Zip: FORT LAUDERDALE, FL 33335

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JACOBSON, HARVEY  
Address: 3141 SE 14 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARVEY JACOBSON

PD

01/28/2004

Electronic Signature of Signing Officer or Director

Date