## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P98000051849 **DOCUMENT#**

1. Entity Name

4400 PETROLEUM CORP.



**FILED** May 01, 2003 8:00 am § Secretary of State

05-01-2003 90132 038 \*\*\*150.00

Principal Place of Business 7284 W PALMETTO PARR RD 101 BOCA RATON FL 33433			Mailing Address 7284 W PALMETTO PARR RD 101 BOCA RATON FL 33433				11001500			
US			US							
2. Principal P	Place of Busin	ess	3. Mailing Address				1881  001   U 1818  101  1 005	I BIJI BUJA UJIU U	(1881-18 <b>88) (18</b> 88) (	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State			City & State				4. FEI Number 65-089189	7	Applied For Not Applicable	
Zip Country			Zip		Country		5. Certificate of Status Desired		\$8.75 Add Fee Require	
	6. Name	and Address of Current F	Registered A	gent			7. Name and Address of New	Registered A	gent	
JAFERI, ALI M					Name		•			
		ADV DO	Street Addre			Address (P	ss (P.O. Box Number is Not Acceptable)			
7284 W, P SUITE 101	ALMETTO F	ARK HU			ļ			<del></del>		
		100								
DOUM NA	TON FL 334	<b>33</b> →			City			FL	Zip Cod	е
the obligat	named entity ions of regist		the purpose	of changing its r	egistered office o	r registere	d agent, or both, in the State of	Florida, I am f	amiliar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if applicable	, (NOTE:	Registered Agent signa	ture required v	when reinstating)	DATE		<del></del> _
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of Sta							Election Campaign     Trust Fund Contribu			0 May Be to Fees
10.	<u> </u>	OFFICERS AND D	DIRECTORS	<u></u>	11.		ADDITIONS/CHANGES TO O	FICERS AND	DIRECTOR	S IN 11
TITLE	EPD	<del></del>	<del></del>	☐ Delete	TITLE	1			Change	☐ Addition
NAME	jaferi, ai				NAMÉ				_	
STREET ADDRESS		almetto park RD, ST	E 101		STREET ADDRESS					
CITY-ST-ZIP	BOCA RAT	ON FL 33433			CITY-ST-ZIP					
TITLE	PD			☐ Delete	TITLE			-	☐ Change	Addition
NAME	KHAN, FAI				NAME	1				
STREET ADDRESS		TH FEDERAL HIGHWAY			STREET ADDRESS					
CITY-ST-ZIP		RDALE FL 33308			CITY-ST-ZIP	1,777				/_
TITLE	VP		•	Delete	TITLE	VV	no AA Vhan		Change	Addition
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STREET ADDRESS CITY-ST-ZIP	ROCA RAT	ALMETTO PARK RD, ST TON FL 33433	<u>E 10</u> 1		STREET ADDRESS CITY-ST-ZIP			X230	F	
	ST	**************************************			<b>_</b>	PC.h	audiraare, th	00000	_	FT Adabi
TITLE NAME	KHAN, RAI	NΔ		☐ Delete	TITLE NAME				☐ Change	Addition
STREET ADDRESS		ALMETTO PARK RD, ST	E 101		STREET ADDRESS	ĺ				
CITY-ST-ZIP		ON FL 33433			CITY-ST-ZiP					
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STREET ADDRESS					STREET ADDRESS					
CITY-ST-7IP					CITY-ST-7IP	1				

12. 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 report of 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 attachn but with an address, with all other like empowered.

SIGNATURE: