

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000052343

1. Entity Name

LD OIL INVEST CO.

FILED

02 APR 18 AM 7:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1220 N. Market St.

Suite, Apt. #, etc.
Suite 606

3. Mailing Address
1220 N. Market St.

Suite, Apt. #, etc.
Suite 606

DO NOT WRITE IN THIS SPACE

City & State
Wilmington, DE

City & State
Wilmington, DE

4. FEI Number

Applied For
☒ Not Applicable

Zip
19801

Country
USA

Zip
19801

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Florida Filing & Search Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)
1333 North Duval Street

City
Tallahassee

FL

Zip Code
32302

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director
Gennadiy Chapskiy
1220 N. Market St., Ste 606
Wilmington, DE 19801

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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****450.00 ****150.00

**DO NOT WRITE
IN THIS SPACE**

13. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Janet M. Caruccio

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-02 302-421-5752

Date

Daytime Phone

CR2E034B (12/01)