FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000065052

1. Corporation Name

CONGRESS AMOCO CORPORATION

Principal Place of Business	Mailing Address
2521 FOREST HILL BLVD.	2521 FOREST HILL BLVD.
WEST PALM BEACH FL 33406	WEST PALM BEACH FL 33406

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90100 045 ***150.00



,							DO NOT WR	ITE IN THIS S	PACE	
						'	rated or Qualifed		_	
					ł	07/21/199) 8			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	106	2//53	ラ Ap	plied For
21		26				65-	0853	14 40	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				= C-46-46	Status Desired		\$8.75	Additional
22		27			Ī	Certificate of	Status Desired		Fee Re	quired
City & State	e	City & State				6. Election Can	npaign Financing		\$5.00	May Be
23		28				Trust Fund (Contribution	ų.	Added t	to Fees
Zip	Country	Zip	Count	ry		8. This corpora	tion owes the cur	rent year Inta	ngible	-,
24	25	29 36	ס			Personal Pro	perty Tax.		☐ Yes	Æ]No
	9. Name and Address of Current	Registered Agent			1	0. Name and	Address of New	Registered A	gent	
			8	1 Nam	e					
	MAN, JOSE		8	Stree	ot Address	(P.O. Box Num	ber is Not Accept	table)		
	FOREST HILL BLVD.			2 3000	at Addiess	(i .O. Box Hain	ber is rect Accep	idbio)		
WES	T PALM BEACH FL 33406		8	3			-			
			lacksquare	_			······································		T227	
			8	4 City				FL	85 Zip (Code
44 Dumuent	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the abo		ed cornoral	tion submits this	statement for the		hanging its	registered
office or re	egistered agent, or both, in the State o	t Florida. Such change was autr	iorizea b	y tne cor	rporation's	board of directo	ors. I hereby acce	pt the appoint	tment as re	gistered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statute	9 \$.						
SIGNATURE		NOTE: O			re required wh	an coincinting)		DATE		\
	Signature, typed or printed name of registered agent OFFICERS AND		13.	erit signatur	re required win		CHANGES TO O		DIRECTO	DRS IN 12
12.	D OFFICERS AND	DELETE	1.1 TITLE		1	ADDITIONS/C	ZITANGEO 10 O	TIOLITO ATL	Change	Addition
TITLE		- October			1				_ ,	_
NAME	ALEMAN, CARMEN		1.2 NAME		_					
STREET ADDRESS	2521 FOREST HILL BLVD.			ET ADDRES	SS					ì
CITY-ST-ZIP	WEST PALM BEACH FL 33406		1.4 CITY						Change	☐ Addition
TITLE	D	☐ DELETE	2.1 TITLE						L Change	☐ Addition
NAME	ALEMAN, JOSE		2.2 NAME	Ε						
STREET ADDRESS	2521 FOREST HILL BLVD.		2.3 STRE	ET ADORES	SS					J
CITY-ST-ZIP	WEST PALM BEACH FL 33406		2. 4 CITY	-ST-ZIP						
TITLE		☐ DELETE	3.1 TITLE	•					Change	Addition
NAME	·		3.2 NAME	Ē						
STREET ADORESS			3.3 STRE	ET ADDRES	SS					
City-ST-Zip			3.4, CITY	-ST-ZIP						
TITLE		DELETE	4.1 TITLE						Change	Addition
NAME			4. 2 NAM	E	- [
				ET ADDRES	38					
STREET ADDRESS					~					
C/TY-ST-Z/P		☐ DELETE	4.4 C/TY		- 		 		Change	Addition
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NAME .				_						
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CITY-ST-ZIP			5.4 CITY-				_		E1 Ch	T A delition
TITLE	}	☐ DELETE	6.1 TITLE						Change	Addition
NAME			6.2 NAMI	E						ĺ
STREET ADDRESS	·		6.3 STRE	ET ADDRES	SS					}
CITY-ST-ZIP			6.4 CITY	ST-ZIP						

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 annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address, with all other like empowered.

SIGNATURE:

Roseless

Daytime Phone #