## 2004 FER PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 04, 2004 08:00 AM Secretary of State

DOCUMENT # P9800 1. Entity Name PETROLEUM HAULERS, INC		
Principal Place of Business 6950 RALEIGH STREET HOLLYWOOD, FL 33024	Mailing Address 6950 RALEIGH STREET HOLLYWOOD, FL 33024	

## No Cha-P CR2E034 (10/03) 01272004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0856344 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAHARAJ, RADESH PERSAD DO NOT WRITE 6950 RALEIGH STREET HOLLYWOOD, FL 33024 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE NAME MAHARAJ, RADESH PERSAD 6950 RALEIGH STREET STREET ADDRESS. CITY-ST-ZIP HOLLYWOOD, FL 33024 U00000032365 02/04/04-80185-033 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CiTY~ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby 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 10 or Block 11 if changed, or on an attacharchit with an address, with all other like empowered.

(d) 0 . ) ( ) 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-964-0715

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Daytime Phone #