

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jun 03, 2002 8:00 am  
Secretary of State

06-03-2002 91198 048 \*\*\*150.00

DOCUMENT # **P98000080023** ✓  
1. Entity Name  
**PETROMART, INC**

Principal Place of Business Mailing Address  
**4990 COCONUT CREEK PKWAY** **4990 COCONUT CREEK PKWAY**  
**COCONUT CREEK** **COCONUT CREEK**  
**FL. 33063** **FL. 33063**

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
City & State City & State  
Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0863033** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

**NAWSHAD CHOWDHURY**  
**10920 N. DANBURY WAY**  
**BOCA RATON, FL. 33498**

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Added to Fee

## 11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
	<b>NAWSHAD CHOWDHURY</b>	<b>10920 N. DANBURY WAY</b>	<b>BOCA RATON, FL. 33498</b>	<input type="checkbox"/>
	<b>V.P.</b>	<b>NIZAM HUB</b>	<b>5901 NW 61 AVE</b>	<input type="checkbox"/>
		<b>PARKLAND FL. 33067</b>		<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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

SIGNATURE: **NIZAM HUB (VP)**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/29/02**  
Date

**561-901-6789**  
Daytime Phone #