PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000085605

1. Corporation Name

CORAL WAY OIL CORP.

Principal	Place	of	Business			

Mailing Address

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90108 025 ***150.00



7311 SOUTHWEST 41ST STREET MIAMI FL 33155	7311 SOUTHWEST 41ST STRE MIAMI FL 33155	7311 SOUTHWEST 41ST STREET MIAMI FL 33155		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed 10/02/1998			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
H	26		<u>-</u>	65-0867115	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc	•		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State	•		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip 30	 		This corporation owes the current year In Personal Property Tax.	ntangible		
9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered Agent				
GALLARDO, JOSE 7311 SOUTHWEST 41ST STREET MIAMI FL 33155		81 82 83		ess (P.O. Box Number is Not Acceptable)			
		84	1	Fi			
11. Pursuant to the provisions of Sections 607	0502 and 607.1508, Florida Statutes,	the above	e-named corpo	ration submits this statement for the purpose of	of changing its registered		

office or registered agent, or both, in the State of Florida. Such change was authorized by the agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE Signature, typed or pnnted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	TORS IN 12	
TITLE	D DELE	ETE	1,1 TITLE		☐ Change	☐ Addition (
NAME	GALLARDO, JOSE		1.2 NAME				
STREET ADDRESS	7311 SOUTHWEST 41ST STREET		1.3 STREET ADDRESS			Ì	
CITY-ST-ZIP	MIAMI FL 33155		1.4 CITY-ST-ZIP		<u> </u>		
TITLE	□ 0ELI	ETE	2.1 TITLE		Change	☐ Addition	
NAME			2.2 NAME			{	
STREET ADDRESS	and the second of the second o	`	2.3 STREET ADDRESS	. a makerana			
CITY-ST-ZIP			2.4 CITY-ST-ZIP				
TITLE	□ DELI	ETE	3.1 TITLE		☐ Change	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP		····		
TITLE		ETE	4.1 TITLE		☐ Change	☐ Addition	
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP			<u></u>	
TITLE	☐ DELI	ETE	5.1 TITLE		☐ Change	☐ Addition {	
NAME .		i	5.2 NAME			}	
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE	☐ DELI	ETE	6.1 TITLE		Change	Addition	
NAME	•		6.2 NAME			ŀ	
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP		***		

14. I hereby certify that the information supplied with this filling 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, or on amatjachment with an address, with all other like empowered.

SIGNATURE: