2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000088151

1. Entity Name
C.P. VEGETABLE OIL (FLORIDA) INC.

Principal Place of Business	Mailing Address
601 S.W. 21ST TERRACE #1 FT. LAUDERDALE, FL 33312	601 S.W. 21ST TERRACE #1 FT. LAUDERDALE, FL 33312

01082005 No Chg-P CR2E034 (10/03)

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4. FEI Number
65-0878660

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PELLERIN, CHRISTIAN
928 NW 110 AVE
PLANTATION, FL 33324

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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 _____ DATE _____
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000002807TB
03/30/05-80031-021 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PELLERIN, CHRISTIAN
STREET ADDRESS	928 NW 110 AVE
CITY-ST-ZIP	PLANTATION, FL 33324
TITLE	ST
NAME	VINET, CLAUDE
STREET ADDRESS	4001 S. OCEAN DR., # 6B
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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

SIGNATURE: Claude Vinet March 10 2005 954-589-0420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #