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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90082 011 \*\*\*150.00

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000096769 1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

R & S PETROLEUM, INC.

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Principal Place	e of Business	Mailing Address			_			•		
1009 SWEETBRIAR PLACE 1009 SWEETBRIAR PLACE					,					
WELLINGTON FL 33414		WELLINGTON FL 33414			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed	<u> </u>	01 A0E		1
	•					11/17/1998				
								- I Ann	lind Eas	┨
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number 87 662	20	<u>                                   </u>	olied For	1
21	26					63 001 66	<u>,                                    </u>	<del></del>	Applicable	┨
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired				
27						Pae Nequieu				
City & Stat	9	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees					
23 28										
Zip	Country > Zip			intry	_	8. This corporation owes the current year Intangible				
24	25	29 30			:	Personal Property Tax. Yes Ino				1
	9. Name and Address of Current	Registered Agent		L.,		10. Name and Address of New R	egistered /	\gent		-
				81	Name					ļ
	KOWSKI, RONALD			82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		<del></del>	1
12798 WEST FORREST HILL BOULEVARD				52 Street Address (P.O. Box Natiber 15 Not Acceptable)						
WEL	LINGTON FL 33414			83		<del></del>				
	•			L				1 - 1		1
				84	City		FL	85 Zîp C	ode	
44 10	to the provisions of Sections 607.0502	and 607 1509. Florida Statu	ites the a	hove	-named corno	ration submits this statement for the	nurnose of o	changing its	registered	t
office or r	registered agent, or both, in the State o	of Florida. Such change was	autnonzeo	J Dy t	ne corporatioi	n's board of directors. I hereby accep	t the appoin	tment as reg	jistered	-
agent. I a	im familiar with, and accept the obligat	ions of, Section 607.0505, Fl	orida Stat	utes.						}
SIGNATURE							DATE			١.
	Signature, typed or printed name of registered agent			i Agent	signature required			D DIRECTO	DC IN 12	] &
12.	OFFICERS ANI		13.		<del></del>	ADDITIONS/CHANGES TO OF	TICERS AN	Change	Addition	Ì
TITLE	PD	<del></del>		1.1 TITLE				□ onango	C_2714475011	}
NAME	SMITH, STEPHEN T		•	1.2 NAME						8
STREET ADDRESS	1009 SWEETBRIAR PLACE		1.3 S	TREET	ADDRESS	•				ļ
CITY-ST-ZIP	WELLINGTON FL 33414		1.4 C	ITY-ST	-ZIP		<u> </u>			įį
TITLE	SD DELETE		2.1 T	2.1 TITLE				Change	☐ Addition	'
NAME	SMITH, ROSEMARY E		2.2 N	AME		•		•	•	{
STREET ADDRESS	1009 SWEETBRIAR PLACE		2.3 S	TREET	ADDRESS	,				1
CITY-ST-ZIP	WELLINGTON FL 33414		240	STY-ST	r-78P					1
TITLÉ		☐ DELETE	3.1 T					Change	Addition	]
NAME			3.2 N							
					ADDDESS					ì
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		C) perete		XTY-ST	T-ZIP	·		Change	Addition	1
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NAME	ł		4.21	IAME	1					1
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TITLE		☐ DELETE	5.1 T	TLE	نت استجر		<del>,</del>	Change -	_	٠
NAME			5.2 N	AME						
STREET ADDRESS			5.3 \$	TREET	ADDRESS			•		
CITY-ST-ZIP			5.4 C	ITY-ST	-ZIP					ļ
TITLE		☐ DELETE	6.1 T	T) E			44.10	Change	Addition	1
	•	LJ VELETE	0.11	TILE		•		L Citalige		1

14. 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 opporation 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 an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP