

DOCUMENT #

1. Entity Name

M.V. GAS, INC.

Principal Place of Business

BUSHNELL, FL

Mailing Address

2238 WEST CR 48
BUSHNELL, FL 33513

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3590092

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
ELIE EID
2245 EAST FLETCHER AVE
TAMPA FL 33612TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
900003590729-5
-01/29/01--01129--014
****150.00 ****150.00TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

P9900006836

MV Gas, Inc.
2238 West CR. 48
Bushnell, FL 33513
Phone (352) 793-3677

January 08, 2001

Elie Eid
Ref. No. P99000068316

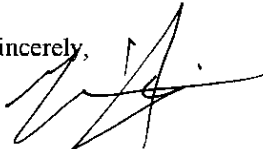
Dear Mr. Khor,

Thank you for your help, and assistance in the corporation matter. I am writing this letter to inform you that the corporation did not receive the 2000 Uniform Business Report notice, and that's why the fee was not paid on time.

Enclosed is a check for One Hundred Fifty Dollars as you requested, and the completed form. I realize that I should be paying another Fee very soon. Should I wait for a notice? Or should I send the fee any ways?

Thank you again, and I apologize for any inconvenience that this may have caused.

Sincerely,



Elie Eid, President

FILED
01 JAN 10 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

1/10