

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90320 029 ***150.00

DOCUMENT # P99000077824

1. Entity Name
PETRO LOGISTICS, INC.

Principal Place of Business

Mailing Address

~~780 NW 42ND AVENUE~~

~~780 NW 42ND AVENUE~~

~~617~~

~~617~~

~~MIAMI FL 33126~~

~~MIAMI FL 33126~~

2. Principal Place of Business

782 NW 42ND AVENUE

3. Mailing Address

305 GALEN DRIVE

Suite, Apt. #, etc.

#430

Suite, Apt. #, etc.

#319

City & State

MIAMI FLORIDA,

City & State

KEY BISCAYNE FL

Zip

33126

Country

USA

Zip

33149

Country

USA

4. FEI Number

65-0953665

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERGER, DAVID S

100 N. BISCAYNE BLVD., SUITE 2608

MIAMI FL 33132

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ~~VOD~~ ☐ Delete
NAME **DE NORONHA, SILVIO J**
STREET ADDRESS **% 100 N. BISCAYNE BLVD., #2608**
CITY-ST-ZIP **MIAMI FL 33132**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DIRECTOR/PRESIDENT** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **PAULO FERNANDO MARANHAO**
CITY-ST-ZIP **AV. SERNAMBETIBA, 6900/323 B1.2**
RIO DE JANEIRO-RJ BRASIL

TITLE ☐ Change ☒ Addition
NAME **VICE-PRESIDENT**
STREET ADDRESS **LUIZ EDUARDO EMATNE**
CITY-ST-ZIP **AV. DAS AMERICAS 4200, SL 514 B1 4**
RIO DE JANEIRO RJ BRASIL

TITLE ☐ Change ☒ Addition
NAME **SECRETARY/TREASURER**
STREET ADDRESS **ANTONIO CARLOS VARGAS**
CITY-ST-ZIP **305 GALEN DRIVE #319**
KEY BISCAYNE FL, 33149

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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 #

4-8-02 305-365-2810

CR2E034 (9/01)