

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000086847

1. Entity Name
GULF COAST PETROLEUM, INC.

Principal Place of Business
3614 CLEVELAND AVE.
FORT MYERS FL 33901

Mailing Address
C/O ROBERT D. ROYSTON, JR.
P.O. DRAWER 60205
FORT MYERS FL 33906

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 65-0951710

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

ROYSTON, ROBERT D JR.
12670 NEW BRITTANY BLVD.
SUITE 101
FORT MYERS FL 33907

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME PATWARY, MOHAMMED M
STREET ADDRESS 13651 INDIAN POINT LANE
CITY-ST-ZIP FORT MYERS FL 33912 ☐ Delete

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

TITLE VP
NAME CHOWDHURY, SHOWKAT A
STREET ADDRESS 2736 HIDDEN LAKES BLVD #B
CITY-ST-ZIP SARASOTA FL 34237 ☐ Delete

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

TITLE S
NAME RAHMAN, MOHAMMAD G
STREET ADDRESS 9521 BOCA COVE CIRCLE APT 506
CITY-ST-ZIP BOCA RATON FL 33426 ☐ Delete

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

TITLE T
NAME AHMAD, MONSUR UDDIN
STREET ADDRESS 965 MOON LAKE DR
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 #

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-30-2001 90330 039 ***150.00



DO NOT WRITE IN THIS SPACE

0534126

CR2E034 (10/00)