

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086847

FILED
Apr 13, 2004
Secretary of State

Entity Name: GULF COAST PETROLEUM, INC.

Current Principal Place of Business:

3614 CLEVELAND AVE.
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

12580 ALLENDALE CR.
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 65-0951710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATWARY, M
12589 ALLENDALE CR.
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PATWARY, MOHAMMED M
Address: 13651 INDIAN POINT LANE
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: CHOWDHURY, SHOWKAT A
Address: 2736 HIDDEN LAKES BLVD #B
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: RAHMAN, MOHAMMAD G
Address: 9521 BOCA COVE CIRCLE APT 506
City-St-Zip: BOCA RATON, FL 33426

Title: D () Delete
Name: AHMAD, MONSUR UDDIN
Address: 965 MOON LAKE DR
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MMPATWARY

P

04/13/2004

Electronic Signature of Signing Officer or Director

_____ Date