2002 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 21, 2002 8:00 am Secretary of State P99000104200 DOCUMENT # 1. Entity Name 04-21-2002 90865 018 ***150.00 SUNNY PETROLEUM CORPORATION Mailing Address Principal Place of Business 8673 LITTLETON ROAD 6810 PEMBROKE PINES MIRAMAR FL 33023 NORTH FORT MYERS FL 33903 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0969127 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MIUNAF $\angle ASHID.$ RASHID. MUNAF Street Address (P.O. Box Number is Not Acceptable) 3006 PALM BEACH BLVD. 8673 LITTLETON ROAD. FT. MEYERS FL 33916 903 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax tilling requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PRESIDENT ☐ Addition ☐ Delete TITLE RASHID MUNAF RASHID, MUNAF NAME NAME 3941.S.W 144th TERRACE 211 S W 178TH WAY STREET ADDRESS STREET ADDRESS MIRAMAR, FL 33027 PEMBROKE PINES FL 33029 CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE Change ■ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

B OR DIRECTOR

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

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 after like empowered.