

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S08004** (1)

1. Corporation Name

**GENERAL PETROLEUM SERVICES, INC.**



Principal Place of Business

**1397 N. HIGHWAY 426  
OVIEDO FL 32765  
US**

Mailing Address

**P.O. BOX 382  
OVIEDO FL 32765**

3. Date Incorporated or Qualified

**10/19/1990**

3a. Date of Last Report

**09/25/1995**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

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City & State

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Zip

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Zip

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Country

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Country

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Country

9. Name and Address of Current Registered Agent

4. FET Number

**59-2947121**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**SALUCK, MARTIN  
1182 GALLANT FOX WAY  
CHULUOTA FL 32766**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date, if applicable.

Name, Registered Agent Signature, typed or printed name, and date, if applicable.

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**P  
SALUCK, DENISE  
1182 GALLANT FOX WAY  
CHULUOTA FL 32766**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME ☐ Change ☐ Addition

3. STREET ADDRESS ☐ Change ☐ Addition

4. CITY - ST - ZIP ☐ Change ☐ Addition

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SIGNATURE: **Denise Saluck**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/30/96 (407)977-1288**

CR2E034 (12/95)