LE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



Feb 17, 1999 8:00am FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State Secretary of State

FILED

	1999	DIVIS	ION OF CORPORATIONS	Secretary or State
	JMENT # S91	1520		02-17-1999 90087 014 ***** 150.00
	1	1009		
SIGM	PETROLEUM, INC.		•	
	144 1414			
Principal Pl	ace of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·	
13695 SW 4		79 HARBOR DR		4
MIAMI FL 33	\$15/ 	KEY BISCAYNE F US	L 33149	DO NOT WRITE IN THIS SPACE
•				3. Date incorporated or Qualified
2. Principa	I Place of Business	2a. Mailing Addr	ess	11/01/1991 11/01/1991
21	r gr	26		65-0293288 Spine For Spine
	ot. #, etc.	Suite, Apt. #,	etc.	5. Certificate of Status Desired
22 City & S	tate	City & State		i i i i i i i i i i i i i i i i i i i
23		28		6. Election Campaign Financing Trust Fund Contribution Addden to Fees
	Country 25	Zip	Country	8. This corporation owes the current year intangible
Z4	[25]	29 29 29 29 29 29 29 29 29 29 29 29 29 2	30	Personal Property Tax. 10. Name and Address of New Registered Agent
90			81 Na	
	HARBOR DR		82 Str	eet Address (P.O. Box Number is Not Acceptable)
	Y BISCAYNE FL 33149		83	
	(): ()		84 City	· · · · · · · · · · · · · · · · · · ·
44 5				FL
office o	nt to the provisions of Sections r registered agent, or both, in t am familiar with and accept t	607.0502 and 607.1508, Florid he State of Florida. Such chang he obligations of, Section 607.0	la Statutes, the above-name was authorized by the confidence of th	ned corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as liegistered
SIGNATUR	an laminal vote and accept	be colligations of, Section 607.0	505, Fiorida Statutes.	1/2/99
12. *()	Stinature, typed or printed name of rec	pictered agent and title if applicable. DERS AND DIRECTORS	(NOTE: Registered Agent signat	ture required when reinstating)
TITLE .	DPS	DERS AND DIRECTORS	LETE 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (Addition 1) Change (1) C
NAME	KUNKEL, SCOTT J.	,	1.2 NAME	7
STREET ADDRES	79 HARBOR DR KEY BISCAYNE FL 331		1.3 STREET ADDRE	
TITLE	DVPT	DE	1.4 CITY-ST-ZIP LETE 2.1 TITLE	Change C Addition
NAME	ROOKS, WILLIAM T.		2.2 NAME	
STREET ADDRES		140	2.3 STREET ADDRE	ESS
TITLE			2.4 CITY-ST-ZIP LETE 3.1 TITLE	☐ Change ☐ Addition
NAME 1	(a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d		3.2 NAME	Change Change
STREET ADDRES	##		3.3 STREET ADDRE	:ss
TITLE	(a ·	□ DE	3.4. CITY-ST-ZIP LETE 4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	Z 13.4 1 Change 5.4 2 Adduon
STREET ADDRES	s		4.3 STREET ADDRE	ss
CITY-ST-ZIP *		□ DE	4.4 CITY-ST-ZIP LETE 5.1 πτLE	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NAME 1			5.2 NAME	Addition
STREET ADDRES			5.3 STREET ADDRE	SS 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CITY-ST-ZIP	***	Ď DEI	5.4 CITY-ST-ZIP ETE 6.1 TITLE	
NAME		ت الدا	62 NAME	Change in Addition
STREET ADDRES		•	6.3 STREET ADDRE	ss
CITY-ST-ZIP	i.	onlied with this filing door set -	6.4 CITY-ST-ZIP	ted in Section 119 07(3)(i) Florida Statutes Lighther certify that the information
· · · · · · · · · · · · · · · · · · ·	Second with the fillering and SUL	ADJUGA MARTICLUS HUNG COCKS LICH CIT	MAINT IOI DIE EXEMPTION STA	neu in persona 119 077380 Fiorida Statutes. I further certify that thetiseformation.

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I amian 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATUR	ĺ
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