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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

V01163

NEWARK PETROLEUM COMPANY, INC.

Principal Place of Business

Mailing Address

12372 QUERCUS LANE WEST PALM BEACH, FL 33414

12372 QUERCUS LANE WEST PALM BEACH, FL 33414 FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90066 044 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

						12/17/1991		
Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap	plied For
21 26						65-0309087	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired	\$8.75	
27						G. Continuate of States Desired	Fee Re	quired
City & State City & State			<u>.</u>			6. Election Campaign Financing	\$5.00	
23 28						Trust Fund Contribution	Added t	o Fees
Zip Country Zip			Country			8. This corporation owes the current year Int		Ren L
24 25 29 30						Personal Property Tax. PAID	Yes	XX No
Name and Address of Current Registered Agent				el Na		10. Name and Address of New Registered	Agent	
Franzblau, Aaron				81 Name				\
12372 Quercus Lane				82 Street Address (P.O. Box Number is Not Acceptable)				
West Palm Beach, FL 33414								
			83	3				Í
			84	4 Cit	v		85 Zip (Code
						FL		
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								
				ent signa	ture required	d when reinstating) DATE	ID DIDECTO	DC IN 12
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
TITLE	PD)					□ Change	
NAME	FRANZBLAU, AARON		1.2 NAME		- }			}
STREET ADDRESS				ET ADOR	ESS			1
CITY-ST-ZIP	WEST PAIM BEACH, FL 33414		1.4 CITY-ST-ZIP					
TITLE '	SD DELETE		2.1 TITLE		-		☐ Change	☐ Addition ∤
NAME '	FRANZBLAU, SARAH							
STREET ADDRESS	·			2.3 STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH, FL 33414			2.4 CITY+ST-ZIP				
TITLE	D DELETE			3.1 TITLE			☐ Change	☐ Addition
NAME -	TARUTZ, ARLEEN D.				-			
STREET ADDRESS	•			ET ADOR	ESS			į
CITY-ST-ZIP	MORRIS PLAINS, NJ 07950			ST-ZIP				
TITLE	D DELETE						☐ Change	☐ Addition
NAME :	_		4. 2 NAME		1			ļ
STREET ADDRESS	CRAFT, JUDITH 33 LAKEVIEW HEIGHTS			4.3 STREET ADDRESS]
CITY-ST-ZIP	MOREHEAD, KY 40351		4.4 CITY-	4.4 CITY-ST-ZIP		•		1
TITLE			5.1 TITLE				Change	Addition
NAME	KURTZ, SUSAN F.		5.2 NAME	5.2 NAME)
STREET ADDRESS	Olon Amporton porton			T ADDRI	ESS			
CITY-ST-ZIP	SOMERVILLE, NJ 08876		5.4 CITY-5	ST-ZIP				
TITLE	D DELETE		6.1 TITLE	i.1 TITLE			☐ Change	Addition
NAME	_		6.2 NAME	6.2 NAME				
STREET ADDRESS	•		6.3 STREE	T ADDRI	ESS			
CITY-ST-ZIP 4:	(2 DAKKI DRIVE			ST-ZIP	}			}
OFFICE OFFICE	,		_		2			

14. 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 annual report or supplemental annual 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 trastile 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, of on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNAND OFFICER OR DIRECTOR

3/26/99 (561) 793-4299

CR2E034 (11/98)