

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V01163

1. Entity Name

NEWARK PETROLEUM COMPANY, INC.

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90276 004 ***150.00

Principal Place of Business
12372 QUERCUS LN
WEST PALM BEACH FL 33414

Mailing Address
12372 QUERCUS LN
WEST PALM BEACH FL 33414

2. Principal Place of Business
7898 Laina Lane

3. Mailing Address
7898 Laina Lane

Suite, Apt., #, etc.
Unit #4

Suite, Apt., #, etc.
Unit #4

City & State
Boynton Beach, FL

City & State
Boynton Beach, FL

Zip
33437

Country

Zip
33437

Country

4. FEI Number 65-0309087

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRANZBLAU, AARON
12372 QUERCUS LN
WEST PALM BEACH FL 33414

7. Name and Address of New Registered Agent

Name

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

7898 Laina Lane

Unit #4

City

Boynton Beach

FL

Zip Code

33437

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	FRANZBLAU, AARON	
STREET ADDRESS	12372 QUERCUS LANE, WELLINGTON	
CITY-ST-ZIP	WEST PALM BEACH FL 33414	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FRANZBLAU, SARAH	
STREET ADDRESS	12372 QUERCUS LANE, WELLINGTON	
CITY-ST-ZIP	WEST PALM BEACH FL 33414	
TITLE	D	<input type="checkbox"/> Delete
NAME	TARUTZ, ARLEEN D	
STREET ADDRESS	18 VALLEY FORGE ROAD	
CITY-ST-ZIP	MORRIS PLAINS NJ 07950	
TITLE	D	<input type="checkbox"/> Delete
NAME	CRAFT, JUDITH	
STREET ADDRESS	999 FOREST LAKE DRIVE	
CITY-ST-ZIP	LEXINGTON KY 40515	
TITLE	D	<input type="checkbox"/> Delete
NAME	KURTZ, SUSAN F	
STREET ADDRESS	9128 MERRITT DRIVE	
CITY-ST-ZIP	SOMERVILLE NJ 08876	
TITLE	D	<input type="checkbox"/> Delete
NAME	FINN, RENEE	
STREET ADDRESS	2 BARRY DRIVE	
CITY-ST-ZIP	FRAMINGHAM MA 01701	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	7898 Laina Lane Unit #4
CITY-ST-ZIP	Boynton Beach, FL 33437
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	7898 Laina Lane Unit #4
CITY-ST-ZIP	Boynton Beach, FL 33437
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)