AMOUNT DUE UN UK BEFORE 19715/99: \$550 (IF DISSOLVED, MIRIMUM AMOUNT DUE TO KEIKSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## **FILED** Jul 07, 1999 8:00 am Secretary of State

07-07-1999 90009 038 \*\*\*150.00

|  | MENT #  | F V25158<br>ROLEUM TECHN   |                      | gy, INC.  |   |  |  |                                  | . 11                                 |  |                      |                      |                                     |                                |  |
|--|---|--|----------------------|---|---|--|--|----------------------------------|--------------------------------------|--|----------------------|----------------------|-------------------------------------|--------------------------------|--|
| Principal Place of Business Mailing Address  |   |  |                      |   |   |  |  |                                  |                                      | DID WILDIN HUDUK DIHUK 11                  | <b>18) (18)</b> (    | DON BANDAR BA        | EKI DOBER DOB                       | LI REGULA TURNITU              |  |
| 4811 US HWY 41 SOUTH P. O. BOX 27 TAMPA FL 33619 TAMPA FL 33   |   |  |                      |   |   | 271267 N/A   |  |                                  |                                      |  |                      |                      |                                     |                                |  |
| US   |   |  | ű                    |   | •••   |  |  |                                  | 1                                    | DO NOT V                                   | VRITE II             | THIS S               | PACE                                |                                |  |
|  |   |  |                      |   |   |  |  |                                  | 3. Date Inc.                         | rporated or Quali                          | fied                 | _                    |                                     |                                |  |
|  |   |  |                      |   |   |  | 03/31/   |                                  |                                      |  | <del></del>          |                      |                                     |                                |  |
| _ '  | Principal Place of Business   |  |                      | 2a. Mailing Address                                     |   |  |  |                                  | 4. FEI Number                        |  |                      |                      |                                     | Applied For<br>Not Applicable  |  |
| <u>L</u>   | Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.  |   |   |  |  | 59-3114467                       |                                      |  | Not Applicate        |                      |                                     |                                |  |
| Suite, Apt.  |   |  |                      |   |   |  |  | 5. Certificate of Status Desired |                                      |  | ل.                   | Fee Required         |                                     |                                |  |
| City & Stat  | <u> </u>  |  | 27 City & State      |   |   |  | <u> </u>   |                                  | _ <del> </del>                       |  |                      |                      | ) May Be                            |                                |  |
| Olly 12.3km  |   | . *2****   | 28                   |   | -   |  |  | -                                | _ !                                  | d Contribution                             | ·                    |                      | •                                   | to Fees                        |  |
| Zip  |   | Country  | 1                    | Zip   |   | Cou  | ntry   |                                  | 8. This corp                         | oration owes the                           | current y            | rear _               |                                     |                                |  |
| ]  | 25  |  |                      | 29  |   | 30   | 30   |                                  | Intangible Personal Property. Yes No |  |                      |                      |                                     | _i No                          |  |
|  | 9. Name an  | d Address of Currer  | nt Regis             | tered Agen  | ıt  |  |  | <del></del>                      | 10. Name a                           | d Address of Ne                            | w Ragis              | stered A             | gent                                |                                |  |
| ***  | DD 0448W (  | •  |                      |   |   | i  | 81 1   | Name                             |                                      |  |                      |                      | _                                   |                                |  |
| WARD, SAMMY F.<br>2211 BELLE CHASE CIRCLE  |   |  |                      |   |   |  | 82 Street Addre  |                                  | ress (P.O. Box N                     | ress (P.O. Box Number is Not Acceptable)   |                      |                      |                                     |                                |  |
|  |   |  |                      |   |   |  |  |                                  |                                      |  |                      |                      |                                     |                                |  |
| TAMPA FL 33834   |   |  |                      |   |   |  | 63   |                                  |                                      |  |                      |                      | _                                   |                                |  |
|  |   |  |                      |   |   |  | 84 (   | City                             |                                      |  |                      | FL                   | 85 Zip                              | Code                           |  |
| -  | resistand coor  | ns of sections 607.050<br>it, or both, in the State<br>, and accept the oblig                                    | r of Elon            | da Such ch  | ONTO WAR I                                  | ローバアハイフタイ  | i hu m   | med corpo<br>e corporati         | ration submits the                   | is statement for the<br>actors. I hereby a | e purpos<br>cept the | e of char<br>appoint | nging Its re<br>ment as N           | agisterad<br>agisterad         |  |
| office or<br>agent, J :<br>IGNATURE  | registered ager<br>am familiar with                                 | it, or both, in the State, and accept the oblig  | of Flori<br>ations o | da. Such ch:<br>f, section 60<br>replicable.            | ange was a<br>17.0505, Fk                   | Buthonzeo<br>orida Stati<br>OTE: Register  | otes.  | e corporati                      | ulred when reimstating)              | ectors. 1 nereby a                         |                      | DATE                 | nem as n                            |                                |  |
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6/30/99 (813)248-1829

## gulfcoast petroleum 125158 technology, inc.

July 21, 1999

P.O. BOX 271267 TAMPA, FLORIDA 33688-1267 TELEPHONE (813) 248-1829 FAX (813) 248-6805 TOLL FRÉE 1-800-330-4854

Attn: Sean Toner Annual Reports Filing FLORIDA DEPARTMENT OF STATE Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

1999 PROFIT CORPORATION ANNUAL REPORT

Dear Mr. Toner:

Per our telephone conversation of this week, I am returning the correspondence which was sent back to me regarding the late fee for filing of the 1999 Annual Report.

As discussed with you, I feel since we never received the original notice of filing the report, I should not be penalized for a late

I would appreciate your assistance in the processing of this report and look forward to receiving confirmation.

If you have any other questions, please feel free to contact me at the above listed phone numbers.

Thank you for your cooperation in this matter.

Sincerely,

GULFCOAST PETROLEUM TECHNOLOGY, INC.

SFW

Attachments (2)