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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**19**98

	Name # V3162	` '			
FLORID	A EXPRESS OIL COMPAN	Y, INC.		r andre willed bride times bried bides dell minic del	nii 6101( 610)) Banii Aikii 188(
Principal Plac	e of Business	Mailing Address			bit græll bildst bildig blætt top t
711 N FLORID	A AVE	711 N FLORIDA AVE			
STE 310		STE 310		DO NOT WRITE IN THIS	2 SDACE
TAMPA FL 331	502	TAMPA FL 33802		3. Date Incorporated or Qualified	J OI ACE
				04/23/1992	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3121049	Not Applicable
<b>├─</b>		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City 8 City		27 Cit. 8 Cit.	<u>.</u>		Fee Required
City & State	y .	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registere	d Agent
BRA	ADLEY, EDWIN J.		B1 Name		
711 N FLORIDA AVE			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
STE 310					<u> </u>
TAN	MPA FL 33602		83		
			84 City	F	85 Zip Code
44 Pureuant t	to the provinces of Sections 607.05	02 and 607 1608. Florida State	the the above-named cor		
office or re	egistered agent, or both, in the State	e of Florida. Such change was	authorized by the corpora	poration submits this statement for the purpose alion's board of directors. I hereby accept the ap-	ppointment as registered
	пі іншініні міні, апо весері(Інс Овіў	jadons di, secuon 607.0505, r	forida Statules.		l
SIGNATURE	Signature, typical or printed menic of registered as	part and title if applicable (NC	TE Registered Agent signature requ	ired when reinstating) DATE	<del></del>
12.		AD DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DST	DELETE.	1.1 TITLE		Change Addition
NAME	BRADLEY, EDWIN J	B.4. 18	1.2 NAME		
STREET ADDRESS	2509 PEMBERTON CREEK D	RIVE	1.3 STREET ADDRESS		
CITY-ST-2IP	SFFNER FL	DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE NAME	op Carter, ross s	L.J. DELETE	2.1 TITLE		Et cuande Et vermon
STREET ADDRESS	4010 CEDAR CAY CIR.		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	VALRICO FL 33594		2. 4 CITY-ST-ZIP	• .	
TITLE	DVP	DELETE	3.1 TITLE		Change Addition
NAME	WILLIAMS, LAYNE T		3.2 NAME		
STREET ADDRESS	602 GAY ROAD		3.3 STREET ADDRESS		
CITY-ST-ZIP	SEFFNER FL 33584		3.4. C/TY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		Ì
CITY-ST-ZIP		Dotter	4.4 CITY-ST-ZIP		Obanca Talawa
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME CENTER ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		C Anguille C Manufulls
STREET ADDRESS			6.3 STREET ADDRESS		
ACHIEFE HATALESS			AND STREET HODITESS		

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 eath; that I am an officer or director of the corporation or the receiver or trusted 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.