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

29

g. Name and Address of Current Registered Agent

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

RASHID, MOHAMMED 1488 HYPOLUXO RD.

LANTANA FL 33462

	MAHMUD'S OIL, INC.				
Pr	incipal Place of Business	Mailing Address			
1486 HYPOLUXO ROAD LANTANA FL 33462		1488 HYPOLUXO ROAD LANTANA FL 33462	DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualified 05/21/1992		
2,	Principal Place of Business	2a. Mailing Address	4. FEI Number Applied F		
21	_	26	<b>59-3124356</b> Not Applie		
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired See Required Fee Required		
23	City & State	City & State	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees		
24	Zip Country	Zip Country 29 30	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No		

30

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.

82

83 84 City

Name 81

SIGNATURE Signature, typod or privind name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE								
<del></del>	Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS		stered Agent signature 13,	required when reInstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	P DE		.1 TITLE	Change Additions	inn			
	•			i Criange C3 vigure	1011			
NAME	RASHID, MOHAMMED M	1	2 NAME					
STREET ADDRESS	1488 HYPOLUXO RD	- 6	.3 STREET ADDRESS					
CITY-ST-ZIP	LANTANA FL 33462		.4 CITY-ST-ZIP					
TITLE	☐ DE	LEIt 2	11 TITLE	☐ Change ☐ Additi	ion			
NAME		. 2	.2 NAME					
STREET ADDRESS		2	3 STREET ADDRESS					
CITY-ST-ZIP			. 4 CITY - ST - ZIP					
TITLE	☐ DE	LETE 3	I TITLE	☐ Change ☐ Additi	ion			
NAME		3	.2 NAME					
STREET ADDRESS		3	3 STREET ADDRESS					
CITY-\$1-ZIP			.4. CITY-ST-ZIP					
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NAME		1 4	. 2 NAME					
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TITLE	☐ DE	LETE 5	.1 ITLE	Change Additi	ion			
NAME		5	.2. AME					
STREET ADDRESS		5	3 Treet address					
CITY-ST-ZIP			4 TY-ST-ZIP					
TITLE	□ DE	LETE	.1 TUE	Change Addite	ion			
NAME .		6	.2 AME					
STREET ADDRESS		6	REET ADDRESS					
CITY-ST-ZIP		6	TY-ST-ZIP					
14. I hereby certify that the information supplied with this filling does not qualify for the emption 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 officer or director of the corporation or the receiver or trustee empowered to execu Block 12 or Block 13 if changed, or on an attachment with an address.

t that my signature shall have the same legal effect as if made under oath; that I am an his report as required by Chapter 607, Florida Statutes; and that my name appears in

Personal Property Tax due June 30.

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

10. Name and Address of New Registered Agent

**FILED** 

Mar 26 1998 8:00am

Secretary of State

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

Zip Code

85

SIGNATURE:

Dibrid

MOHAHHED

03-20-98