

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

FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V47342 (3)

1. Corporation Name

SPACE COAST PETRO DISTRIBUTOR, INC.

Principal Place of Business

Mailing Address

7 N COCOA BLVD
COCOA FL 32922
US

7 N COCOA BLVD
COCOA FL 32922
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/26/1992

4. FEI Number

59-3133348

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 402 High Point Dr.

26 402 High Point Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Cocoa FL

28

Cocoa FL

Zip

Country

Zip

Country

24

32926

25

29

32926

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LINTZ, LESTER
1970 MICHIGAN AVE.
BLDG. C
COCOA FL 32922

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	SHAH, MAHESH R.	702 HAWKSBILL ISLAND DR.	SATELLITE BEACH FL	☐
DS	SHAH, RASHMI M.	702 HAWKSBILL ISLAND DR.	SATELLITE BEACH FL	☐
VP	BHALANI, GITA	7 NORTH COCOA BLVD	COCOA FL	☐
				☐
				☐
				☐

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY-ST-ZIP</td> <td>☐</td> <td>☐</td>	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	☐	☐
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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 trustee 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.

CR2E034 (10/97)