2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2004
Secretary of State

DOCUMENT# 818984

Entity Name: TEMCOR

Current Principal Place of Business:

150 W WALNUT STREET, #150
GARDENA, CA 90248 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 48008
GARDENA, CA 90248 US

New Mailing Address:

FEI Number: 95-2319480 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MITCHELL, W. G.,
Address: 150 W WALNUT STREET, #150
City-St-Zip: GARDENA, CA 90248

Title: SD ( ) Delete
Name: HORTON, E. LEE,
Address: 1633 VIA MACHADO
City-St-Zip: PALOS VERDES EST, CA

Title: CD ( ) Delete
Name: MILLER, C. E.,
Address: 150 W WALNUT STREET, #150
City-St-Zip: GARDENA, CA 90248

Title: V ( ) Delete
Name: MARGOLF, G CLARK
Address: 150 W WALNUT STREET, #150
City-St-Zip: GARDENA, CA 90248

Title: PTD ( ) Delete
Name: TOURVILLE, CHARLES A, .
Address: 150 W WALNUT STREET, #150
City-St-Zip: GARDENA, CA 90248

Title: VP ( ) Delete
Name: SICKAFOOSE, DANIEL D
Address: 1150 W. WALNUT ST., STE 150
City-St-Zip: GARDENA, CA 90248

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: HORTON, E. LEE,
Address: 1633 VIA MACHADO
City-St-Zip: PALOS VERDES EST, CA

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change ( ) Addition
Name: TOURVILLE, CHARLES A, .
Address: 150 W WALNUT STREET, #150
City-St-Zip: GARDENA, CA 90248

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES A. TOURVILLE PD 01/19/2004

Electronic Signature of Signing Officer or Director Date