

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

FILED
Jul 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # S60479 (0)
 1. Corporation Name
CROSSROADS R & R TEXACO, INC.



Principal Place of Business: **1625 OLD DIXIE JUPITER FL 33459**
 Mailing Address: **P.O. BOX 3162 TEQUESTA FL 33469**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **None**
 2a. Mailing Address: **P.O. Box 3162 Tequesta Fl.**
 21. Suite, Apt. #, etc.: **at present**
 22. City, State: **Filing to keep**
 23. Country: **Corp Certificate**
 24. Zip: **33469**
 25. Country: **FL**

3. Date Incorporated or Qualified: **06/17/1991**
 4. FEI Number: **65-0272123**
 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

9. Name and Address of Current Registered Agent
MILLER, RAY E
1625 OLD DIXIE
JUPITER FL 33459

Same agent address Different address

10. Name and Address of New Registered Agent
 81 Name: **Ray E. Miller**
 82 Street Address: **139 E Hampton Way**
 83 City: **Jupiter** FL 85 Zip Code: **33458**

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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: **Ray E Miller** DATE: **4-29-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DPT MILLER, RAY E.	1.2 NAME	Ray E. Miller
STREET ADDRESS	1625 OLD DIXIE	1.3 STREET ADDRESS	139 E Hampton Way
CITY-ST-ZIP	JUPITER FL 33458	1.4 CITY-ST-ZIP	Jupiter Fl. 33458
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DVS MILLER, RICHARD	2.2 NAME	Richard Miller
STREET ADDRESS	1625 OLD DIXIE	2.3 STREET ADDRESS	139 E Hampton Way
CITY-ST-ZIP	JUPITER FL 33458	2.4 CITY-ST-ZIP	Jupiter Fl. 33458
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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 a continuation with an address.

SIGNATURE: **Ray E Miller** DATE: **4-29-98**

CR2E034 (10/97)