


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

FILED  
Apr 27 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 # 836236 (0) 1. Corporation Name RESTRUCTURE PETROLEUM MARKETING SERVICES, INC.		

Principal Place of Business 2550 NORTH LOOP WEST STE. 600 HOUSTON TX 77092-8908 US	Mailing Address 2550 NORTH LOOP WEST STE. 600 HOUSTON TX 77092-8908 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 205 S. HOOVER BLVD. Suite, Apt. #, etc. 22 SUITE 101 City & State 23 TAMPA, FL Zip 24 33609 Country 25 U.S.		2a. Mailing Address 26 205 S. HOOVER BLVD. Suite, Apt. #, etc. 27 SUITE 101 City & State 28 TAMPA, FL. Zip 29 33609 Country 30 U.S.		3. Date Incorporated or Qualified 04/26/1976	4. FEI Number 75-1372068 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST. STE. 105 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
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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 \_\_\_\_\_ (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	BAILEY, BOB E. 2550 NORTH LOOP WEST STE. 600 HOUSTON TX 77092-8908 <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P/T JACK CECCARELLI 205 S. HOOVER BLVD. SUITE 101 TAMPA, FL. 33609 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VATD LAMBERT, HAROLD E. 2550 NORTH LOOP WEST STE. 600 HOUSTON TX 77092-8908 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V/S BRADFORD VASSEY 205 S. HOOVER BLVD. SUITE 101 TAMPA, FL. 33609 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWELL, ROBERT L. 2550 NORTH LOOP WEST STE. 600 HOUSTON TX 77092-8908 <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	CONTROLLER/ASST SECRETARY CAROLYN ROBERTSON 205 S. HOOVER BLVD. SUITE 101 TAMPA, FL. 33609 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT PORTEWIG, RICHARD 2550 NORTH LOOP WEST STE. 600 HOUSTON TX 77092-8908 <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	J JAMES FARMER 205 S. HOOVER BLVD. SUITE 101 TAMPA, FL. 33609 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS STROMATT, TERRI L 2550 NORTH LOOP WEST, STE. 600 HOUSTON TX <input checked="" type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	J JOHN CORBETT 1378 GROVE TERRACE WINTER PARK, FL. 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	J MIKE JOHNSTON 608 SEVERIGE COURT ROCKWALL, TX. 75087 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Carolyn R. Robertson 1-13-98 (813) 636-8111

CR2E034 (10/97)