

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90210 010 ***150.00

DOCUMENT # 848735
1. Entity Name MOBIL LAND DEVELOPMENT CORPORATION

DO NOT WRITE IN THIS SPACE

70038341

2. Principal Place of Business 16825 Northchase Dr. Suite, Apt. #, etc.	3. Mailing Address 800 Bell Street Suite, Apt. #, etc. 2605
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City & State Houston, TX	City & State Houston, TX	4. FEI Number 13-2668993	Applied For <input type="checkbox"/> Not Applicable
Zip 77060	Country	Zip 77002	Country
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			

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7. Name and Address of Current Registered Agent

Name The Prentice Hall Corporation System Inc
Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street
Suite Suite 105
City Tallahassee
State FL
Zip Code 32301-2525

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing - Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE President/Director	NAME N. G. Greco	TITLE	NAME
STREET ADDRESS 16825 Northchase Dr.	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP Houston, TX 77060	CITY - ST - ZIP	CITY - ST - ZIP	CITY - ST - ZIP
TITLE VP/Controller/Director	NAME D. M. Alexanger	TITLE	NAME
STREET ADDRESS 16825 Northchase Dr.	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP Houston, TX 77060	CITY - ST - ZIP	CITY - ST - ZIP	CITY - ST - ZIP
TITLE Secretary	NAME S. Kishinevsky	TITLE	NAME
STREET ADDRESS 16825 Northchase Dr.	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP Houston, TX 77060	CITY - ST - ZIP	CITY - ST - ZIP	CITY - ST - ZIP
TITLE Assistant Secretary	NAME R. O. Katz	TITLE	NAME
STREET ADDRESS 16825 Northchase Dr.	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP Houston, TX 77060	CITY - ST - ZIP	CITY - ST - ZIP	CITY - ST - ZIP
TITLE Treasurer	NAME D. L. Dollo	TITLE	NAME
STREET ADDRESS 16825 Northchase Dr.	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP Houston, TX 77060	CITY - ST - ZIP	CITY - ST - ZIP	CITY - ST - ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP	CITY - ST - ZIP	CITY - ST - ZIP

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert O. Katz

Robert O. Katz

(713) 656-5022

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #