

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000003567

1. Entity Name

TERMINAL TECHNOLOGIES, INC.

Principal Place of Business

P.O. BOX 4334  
HOUSTON TX 77210

Mailing Address

P.O. BOX 4334  
HOUSTON TX 77210

2. Principal Place of Business

5200 Cedar Crest Blvd

Suite, Apt. #, etc.

3. Mailing Address

5151 SAN FELIPE

Suite, Apt. #, etc.

SUITE 1600

City & State

HOUSTON, TX

City & State

HOUSTON, TX

Zip

77087

Country

USA

Zip

77056

Country

USA

4. FEI Number

76-0362572

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE V  
NAME PETERSON, TOM  
STREET ADDRESS 5151 SAN FELIPE, SUITE 1600  
CITY-ST-ZIP HOUSTON TX ☐ Delete

TITLE S  
NAME SOULE, COLIN  
STREET ADDRESS 100 KING STREET WEST  
CITY-ST-ZIP HAMILTON ON L8N4J ☐ Delete

TITLE T  
NAME RAMIREZ, MICHAEL W  
STREET ADDRESS 5151 SAN FELIPE, STE 1600  
CITY-ST-ZIP HOUSTON TX 77056 ☒ Delete

TITLE PD  
NAME THOMAS, ALEC  
STREET ADDRESS 5151 SAN FELIPE, STE 1600  
CITY-ST-ZIP HOUSTON TX 77056 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ASSISTANT SECRETARY  
NAME DEBBIE HUSTON  
STREET ADDRESS 5151 SAN FELIPE, Suite 1600,  
CITY-ST-ZIP HOUSTON TX 77056. ☐ Change ☒ Addition

TITLE ASSISTANT SECRETARY  
NAME MARIYS PALUMBO  
STREET ADDRESS 5151 SAN FELIPE, Suite 1600  
CITY-ST-ZIP HUSTON, TX 77056. ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Colin Soule - Secretary

Date

Aug 30/00 905-521-1600

Daytime Phone #

FILED

00 SEP 14 PM 2:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)