

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000394

Entity Name: Q LUBE, INC.

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

910 LOUISIANA
HOUSTON, TX 77002

New Principal Place of Business:

Current Mailing Address:

910 LOUISIANA
ROOM 4279G
HOUSTON, TX 77002

New Mailing Address:

FEI Number: 52-1422362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: BUCH, L.L.
Address: 700 MILAM
City-St-Zip: HOUSTON, TX 77002

Title: DVP () Delete
Name: BOYLE, D.S.
Address: 910 LOUISIANA
City-St-Zip: HOUSTON, TX 77002

Title: T () Delete
Name: ADAMSON, M.J.D.
Address: 910 LOUISIANA
City-St-Zip: HOUSTON, TX 77002

Title: S () Delete
Name: ROY, A.M.
Address: 910 LOUISIANA
City-St-Zip: HOUSTON, TX 77002

Title: AS () Delete
Name: PAUL, S J
Address: 910 LOUISIANA
City-St-Zip: HOUSTON, TX 77002

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LYNG, K.M.
Address: 700 MILAM
City-St-Zip: HOUSTON, TX 77002

Title: VPTX (X) Change () Addition
Name: ERICKSON, D.A
Address: 910 LOUISIANA
City-St-Zip: HOUSTON, TX 77002

Title: T (X) Change () Addition
Name: NOORDEGRAAF, S.W.A.
Address: 1301 MCKINNEY, STE. 700
City-St-Zip: HOUSTON, TX 77010

Title: S (X) Change () Addition
Name: PINEDA, H.A.
Address: 910 LOUISIANA
City-St-Zip: HOUSTON, TX 77002

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 Chapter 119, 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: LIZA L. MONROE

MGR

04/21/2006

Electronic Signature of Signing Officer or Director

_____ Date