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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Secretary of State

Jul 09 1998 8:00am

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600005956 (5)

PETRO STAFF SERVICES, INC.

Principal Place	e of Business	Mailing Address		I DORABE IND NORM BRISH BONK BONK BONK BONK BONK BONK BONK BONK
PO BOX 37 BARKER TX 77413		PO BOX 37 BARKER TX 77413		
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 11/14/1996
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		76-0227559 Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired
City & State	3	City & State		6. Election Campaign Financing \$5.00 May Be
23 Zin	Country	28	T Country	Trust Fund Contribution
Zip 24	25	29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
241	9. Name and Address of Curr		30	10. Name and Address of New Registered Agent
CT	CORPORATION SYSTEM		81 Nam	
	O SOUTH PINE ISLAND ROAD)	82 Stree	Address /DO Day Museus is Mat Associable)
	INTATION FL 33324		52 Stree	eet Address (P.O. Box Number is Not Acceptable)
			83	
			84 City	y 85 Zip Code
44 Durement t	to the province of Spetions 607.06	COS and COT 1509 Florida State	too the shove name	pad corporation submite this statement for the nurses of changing its registered
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statules, 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 Statules.				
•	m lamiliar with, and accept the obli	igations of Section 607.0505, r	lorida Statutes.	
SIGNATURE	Signature, typod or printed name of registered a	spent and title if applicable 1000	TE: Registered Agent signati	rature required when reinstating) OATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETÉ	1.1 TITLE	Michael F. Brown
NAME	MARC S DOWDY		1.2 NAME	Michael F. Brown
STREET ADDRESS	535 E FERNHURST		1 3 STREET ADDRESS	SS 535 E. Fernhurst Katy Tx 77450
CITY-S1-ZIP	KATY TX		1.4 CITY-ST-7IP	
TITLE	VOLANDA C DOMOV	☐ DELETE	21 TITLE	Change Addition
NAME	YOLANDA C. DOWDY \$35 E FERNHURST		22 NAME	
STREET ADDRESS	KATY TX		2.3 STREET ADDRESS	SS
CITY-ST-ZIP	<u>8</u>	DEILLE	2. 4 CHY-ST-ZIP 3.1 TITLE	Change Addition
NAME	YOLANDA C. DOWDY		3.2 NAME	Change wanter
STREET ADDRESS	63 5 E FERNHURST		3.3 STREET ADDRESS	cee l
CITY-SI-ZIP	KATY TX		3.4. CITY- ST- ZIP	33
THILE	T	DELETE	4.1 TILE	Change Addition
NAME	MARC S. DOWDY		4. 2 NAME	
STREET ADDRESS	53 5 E FERNHURST		4.3 STREET ADDRESS	SS
CITY-ST-ZIP	KATY TX		4.4 CITY - ST - ZIP	
TITLE		☐ DELFTE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	ss
CITY-\$T-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	61111115	L] Change L_ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	SS
CITY-ST-ZIP	ortile that the information commind	with the films door not qualify	6 4 C(TY-ST-Z)P	Lated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of officer or o	on this annual report or supplemen	ital annual report is true and ac- iceiver or trustee empowered to	curate and that my s	signature shall have the same legal effect as if made under oath; that I am an t as required by Chapter 607, Florida Statules; and that my name appears in