## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F97000000451

FILED Feb 02, 2005 Secretary of State

Entity Nam	ne: TOTAL TU	JRBINE SERVICES, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
	HSTREET #1( RAIRIE, TX 75					
Current Mailing Address:				New Mailing Address:		
	H STREET #10 RAIRIE, TX 75					
FEI Number:	75-2570620	FEI Number Applied For ( )	FEI Num	ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
JIMENEZ, ANABEL 7850 NW 146TH ST. STE. #402 HIALEAH, FL 33016 US				JIMENEZ, ANABEL 15025 NW 77 AVE STE. 126 MIAMI LAKES, FL 3:	3014 US	
The above in the State		submits this statement for the pu	ırpose of	changing its register	red office or registered agent, or both,	
SIGNATURE:					02/02/2005	
	Electron	ic Signature of Registered Agen	nt		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () FOX, JOHN R 2550 114TH ST GRAND PRAIRI			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	STD () CLEMENS, ROB 2550 114TH ST GRAND PRAIRI	, STE 105		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT CLEMENS VΡ 02/02/2005