



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000004446 1. Entity Name MINI PARTNERS, INC.	
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Principal Place of Business 10575 WESTOFFICE DRIVE HOUSTON, TX 77042	Mailing Address 10575 WESTOFFICE DRIVE HOUSTON, TX 77042
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DO NOT WRITE IN THIS SPACE

	
05182004 No Chg-P CR2E034 (10/03)	
4. FEI Number 76-0642063	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$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	DO NOT WRITE IN THIS SPACE
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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

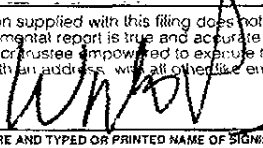
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD MULVANEY, DOUGLAS L 10575 WESTOFFICE DRIVE HOUSTON, TX 77042
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V ROBERTSON, GUY J SR. 10575 WESTOFFICE DRIVE HOUSTON, TX 77042
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MURNEY, DONALD W 2727 NORTH CENTRAL AVENUE PHOENIX, AZ 85004
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D KRIEGER, JON A 12133 EAST CORTEZ DRIVE SCOTTSDALE, AZ 85259
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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05/20/04-80006-019 158.75

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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 Block 11 if changed, or on an attachment with an address, with all other duly empowered.

SIGNATURE:  **WALTER PENNINGTON** 5/19/04 713-464-6944
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #