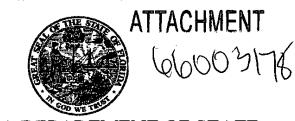
2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: _

Mar 01, 2006 8:00 am Secretary of State 02-10-2006 90033 020 ***150.00 DOCUMENT # P05000062292 1. Entity Name 1153 TEXACO, INC. Principal Place of Business Mailing Address 66003178 1153 N. MILITARY TRAIL 1153 N. MILITARY TRAIL W. PALM BEACH, FL 33409 W. PALM BEACH, FL 33409 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092006 Chg-P CR2E034 (11/05) City & State Applied For City & State Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KIBRIA, MOHAMMED Street Address (P.O. Box Number is Not Acceptable) 1153 N. MILITARY TRAIL W. PALM BEACH, FL 33409 City 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 Plorida. I am familiar with, and accept the obligations of registered agent. Signature: yould or prized name of registered agent and late if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE Delete ITTLE KIBRIA, MOHAMMED NAME NAME STREET ADDRESS 1153 N. MILITARY TRAIL STREET ADDRESS CITY-S1-ZIP CITY - \$1 - 21P W. PALM BEACH, FL 33409 ☐ Defete TITLE Chance ☐ Addition CHOWDHARY, MD. A NAME STREET ADDRESS 1153 N. MILITARY TRAIL STREET ADORESS CITY-ST-ZIP W. PALM BEACH, FL 33409 CITY-ST-ZIP ☐ Deteta ☐ Change ☐ Addition TITLE HALLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE MALE HALE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-51-21P TITLE ☐ Change Add-lien Delete Title NAME STREET ADDRESS STREET ADDRESS CITY-S1-21P CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NASAF HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under cath, 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 like empowered. 01.16.06 MD. MD. A CHOWDHARY SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2006

1153 TEXACO, INC. 1153 N. MILITARY TRAIL W. PALM BEACH, FL 33409

Subject: 1153 TEXACO, INC.

Reference Number:

P05000062292

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm ANNUAL REPORTS SECTION