## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # P07398 02-23-2004 90036 031 \*\*\*150.00 CONSERVATEK INDUSTRIES, INC. Principal Place of Business Mailing Address 44012320 498 LOOP 336 E P.O. BOX 1678 CONROE, TX 77305 CONROE, TX 77305 01062004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 76-0121413 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM DO NOT WRITE 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS COB TITLE ALFONSO, LOPEZ NAME 498 LOOP 336 E STREET ADDRESS CITY-ST-ZIP CORNOE, TX TITLE CAMPBELL, MS. EUGENIA H. NAME STREET ADDRESS 498 LOOP 336 E CONROE, TX CITY-ST-7IP TITI F NAME BROWN, DON STREET ADDRESS 498 LOOP 36 E DO NOT WRITE CONROE, TX-CITY-ST-ZIP-IN THIS SPACE NAME DUCOTEY, STEVEN 29 DOVER STREET ADDRESS CONROE, TX CITY-ST-ZIP TITLE METHA, RAJENDU NAME

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 like empowered.

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21306 PARKMILL LN

KATY, TX

STREET ADDRESS CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 01-04-2004

539-1747

Daylime Phone 6

FILED Feb 23, 2004 8:00 am