

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 19, 2001 8:00 am  
Secretary of State

04-19-2001 90062 014 \*\*\*150.00

DOCUMENT # P18274

1. Entity Name

PETRO, INC. - TEXAS



Principal Place of Business

6080 SURETY DR.  
EL PASO TX 79905

Mailing Address

P O BOX 17993  
EL PASO TX 79917

2. Principal Place of Business

140 SOUTH PRADO ROAD  
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 17993  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

EL PASO, TX

City & State

EL PASO, TX

4. FEI Number 74-1816679

Applied For

Not Applicable

Zip

79907

Country

U.S.A.

Zip

79917

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAPITOL CORPORATE SERVICES, INC.  
1333 NORTH DUVAL  
TALLAHASSEE FL 32303

Name

NIA - NO CHANGE

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☒  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CARDWELL, J.A. 6080 SURETY DRIVE EL PASO TX 79905	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARDWELL, J.A. JR 6080 SURETY DRIVE EL PASO TX 79905	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARDWELL, EVONNE 6080 SURETY DRIVE EL PASO TX 79905	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SINGLETON, JAMES M 140 SOUTH PRADO RD EL PASO TX 79907	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*J. Singleton, Vice-President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13-14-01 915-860-4480  
Date Daytime Phone #

CR20034 (10/00)