


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P18274</b> 1. Entity Name PETRO, INC. - TEXAS	
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Principal Place of Business 140 SOUTH PRADO ROAD EL PASO, TX 79907	Mailing Address P O BOX 17993 EL PASO, TX 79917
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**DO NOT WRITE IN THIS SPACE**



01262005 No Chg-P CR2E034 (10/03)

4. FEI Number 74-1816679	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when translating) \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000268212 03/18/05-80033-013 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD CARDWELL, J.A. 6080 SURETY DRIVE EL PASO, TX 79905
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CARDWELL, J.A. JR 6080 SURETY DRIVE EL PASO, TX 79905
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD CARDWELL, EVONNE 6080 SURETY DRIVE EL PASO, TX 79905
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SINGLETON, JAMES M 140 SOUTH PRADO RD EL PASO, TX 79907
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE: JAMES M. SINGLETON 3-15-05 (915) 860-4480  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #