05-19-1999 90004 003 *1,350.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P22016

1. Corporation Name

TEXACO REFINING AND MARKETING (EAST) INC.

Principal Place	of Business	Mailing Address						
2000 WESTCHESTER AVE P.O. BOX 1404								
WHITE PLAINS NY 10650 DEPT. 007								
US	US HOUSTON TX 77251-1404					DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualifed	}		
					12/07/1988			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Ap	plied For		
21 26					51-0285314 No	t Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.			\$8.75 Additional			dditional		
22 27					5. Certificate of Status Desired Fee Re	quired		
City & State City & State					6. Election Campaign Financing S5.00	May Bo		
_	7	⊢	ony a outo			g \$5.00 May Be Added to Fees		
23	Zip Country Zip C		Country		110011 0110 0 1111	3000		
Zip				6. //iii co, po, co.				
24	25 29 30		r	Personal Property Tax. LYes LNo 10. Name and Address of New Registered Agent				
	9. Name and Address of Curren	t Registered Agent	- 04	1				
70.15	PRESIDE HALL CORROBATION	OVOTEM INC	81	Nar	ıme			
THE PRENTICE-HALL CORPORATION SYSTEM INC.			82	Stre	reet Address (P.O. Box Number is Not Acceptable)			
1201 HAYS STREET								
SUITE 105			83					
TALLAHASSEE FL 32301						<u></u>		
			84	City	FL 85 Zip C	ode		
	60. 1 607.050	2 LOOT 1509 Florida Statutas t	bo obove		mod composition cultimits this statement for the purpose of changing its	registered		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				nt signat	ature required when reinstating) DATE			
12.		D DIRECTORS	13.		ADDITIONS THANGES TO OFFICERS AND DIRECTO			
TITLE	AT	™ DELETE	1.1 TITLE		HSS Start Uniprofee Change	Addition		
NAME	ASHLEY, B R		1.2 NAME		1. P. Deugherfy			
STREET ADDRESS	1111 BAGBY STREET 1.3S		1.3 STREET	TADDRE	RESS IIII BUNDUKT			
CITY-ST-ZIP	HOUSTON TX 77002		1.4 CITY-S	T-ZIP	HAUCEN TOXUS 17002-0200	>		
TITLE			2.1 TITLE		Change	☐ Addition		
NAME			2.2 NAME					
			2.3 STREET	TADDO	pree			
STREET ADDRESS								
CITY-ST-ZIP			2.4 CITY-S	ST-ZIP	Has stant secretary Change	I □ Addition		
TITLE	WO		3.1 TITLE		The state of the s	- MONOIT		
NAMÉ	ATTERMEDIA, F.S.		3.2 NAME		Michael Company			
STREET ADDRESS			3.3 STREET	T ADDRE	ESS LILL BOYOUT OF MAN O MAN	_		
CITY-ST-ZIP	7.000.01.11.11.002		3.4. CITY-S	ST-ZIP		0		
TITLE	S	DELETE	4.1 TITLE		□ Change	Madition !		
NAME	DAVIDSON, C.B.		4. 2 NAME		K.M. (thipperson			
STREET ADDRESS	2000 WESTCHESTER AVE		4.3 STREE	T ADDRE	ress 2000 Wystchester the	į		
*	WHITE PLAINS NY		4.4 CITY-S		White Plains ALU IDEAD			
CITY-ST-ZIP	AS	☐ DELETE	5.1 TITLE	· , - <u></u> Jr	Change	☐ Addition		
	· · -		5.2 NAME					
NAME	NAMMOUR, A.J.		5.3 STREE	T ADDO	pess			
STREET ADDRESS	1111 BAGBY STREET				1200			
CJTY-ST-ZIP	HOUSTON TX		5.4 CITY-S	T-ZIP				
TITLE	CD	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition		
NAME	TILTON, G. F		6.2 NAME					
STREET ADDRESS	1111 BAGBY ST.		6.3 STREET	T ADDRI	RESS			

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: