SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2001 UNIFORM BUSINESS REPORT (UBR)								Star Commence					
DOCUMENT # P28743							FILED						
1. Entity Name TEXACO REFINING AND MARKETING INC.							01 MAY 23 PM 4: 22						
Principal Plac 000 WESTCHES VHITE PLAINS I IS	STER AVE		Mailing Address P.O. BOX 1404 DEPT. 007 HOUSTON TX 77251-1404 US				H		.48(1811) (48)	TARY OF ASSEE, F		: 01011 1 10 1	
2. Principal P	Place of Busine	ess	3. Mailing Address										
Suite, Apt.	#, etc.		Suite, Apt. #, etc.						DO NOT WR	ITE IN THIS	SPACE		
City & State	e		City & State				4. FE	I Number	76-029476	50	<u> </u>	plied For t Applicable	
Zip		Country	Zip Coun		try	5. Certificate			Status Desired		\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent					Name		7. Na	me and Ad	dress of New	Registered /	Agent		
	PRENTICE-H HAYS STRI	HALL CORPORATION SY EET	YSTEM INC.		Street A	et Address (P.O. Box Number is Not Acceptable)							
	e 105 Ahassee F	FL 32301			City					FL	Zip Code	9	
8. The above	named entity	submits this statement for t	he purpose of changing its	register	ed office o	r register	ed ager	nt, or both, i	n the State of F	Florida.			
SIGNATURE.	Signature, typed	or printed name of registered agent and	ititle if applicable. (NOTE	E: Registere	d Agent signat	ure required	I when rein:	stating)		DATE			
Tax filing :	_	ble to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			te		on Campaign F Fund Contribut	_		O May Be to Fees		
11.		OFFICERS AND D		12.					ANGES TO OF	FICERS AND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TILTON, G 1111 BAG HOUSTON	BY ST.	Delete			W n	r Wa	litKer	ter M	w. 1065	© Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MORBY, G 1111 BAG HOUSTON							80	0004 -06/1		928-)1117(****1	005	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HUDGENS 1111 BAG	, T. F.	Delete	TITLI NAM STRE		JP IIII	BI	hadis Shy	St.	לנח	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MYERS, P.	. L TCHESTER AVE.	☐ Delete			6.001	v2,TT	J YI, I 4	<u>~ ' </u>	<i></i>	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RUDY, M.H 2000 WES	1. TCHESTER AVE	☐ Delete							,	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS NAMMOUF 1111 BAGI HOUSTON	BY ST.	Delete :	TITLI NAM STRE							☐ Change	Addition	
12 I barabu	aartifu that the	e information supplied with the tor supplemental report is the receiver or trustee empty achment with products.	nis filing does not qualify for rue and accurate and that n rered to execute this report if all other like empowered.	the eve	motion sta	ted in Se nave the s apter 607	ection 1° same le 7, Florida	19.07(3)(i), F gal effect as a Statutes; a	Florida Statutes if made unde and that my name	s. I further cer r oath; that I a me appears i	tify that the ir am an officer n Block 11 or	nformation or director Block 12 if	