

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90210 008 ***150.00

DOCUMENT # P38388

1. Entity Name
JIFFY LUBE INTERNATIONAL, INC.



Principal Place of Business
**700 MILAM
HOUSTON TX 77002-2806
US**

Mailing Address
**P.O. BOX 2967
HOUSTON TX 77252-2967**



2. Principal Place of Business
910 LOUISIANA

3. Mailing Address
910 LOUISIANA

Suite, Apt. #, etc.
ROOM 4279G

City & State
HOUSTON, TX

CHECK HERE IF MAKING CHANGES

Zip
77002

Country

Zip
77002

Country

4. FEI Number **22-2806458**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SO. PINE ISLAND RD.,
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRAHAM, MARC C 700 MILAM HOUSTON TX 77002-2806 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MCCONNELL, THOMAS M. 700 MILAM HOUSTON TX 77002-2806 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BASSETT, GREGORY D. 700 MILAM HOUSTON TX 77002-2806 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LYNG, KEVIN M 700 MILAM HOUSTON TX 77002-2806 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT STEWART, LAURIE K 700 MILAM HOUSTON TX 77002-2806 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KOONTZ, SUSAN DIANE 700 MILAM HOUSTON TX 77002-2806 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO D. J. PIRRET 700 MILAM HOUSTON, TX 77002 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D D. J. PALMER 910 LOUISIANA HOUSTON, TX 77002 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S K. D. JOSEPH 910 LOUISIANA HOUSTON, TX 77002 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-TAX D. A. ERICKSON 910 LOUISIANA HOUSTON, TX 77002 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS S. J. PAUL 910 LOUISIANA HOUSTON, TX 77002 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: SIGNATURE REQUIRED S. J. PAUL 4/28/2003 713/241-4461

CR2E034 (10/02)