2004 FOR PROFIT CORPORATION ANNUAL REPORT

8/31/.

FILED
Sep 27, 2004 8:00 am
Secretary of State
08-31-2004 90003 007 ***550.00

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07232004 Chg-P CR2E034 (10/03)

DOCUMENT # P94000062111

1. Entity Name
TOTAL CONVENIENCE MARKETING, INC.

Principal Place of Business	Mailing Address
11410 JOLLYVILLE RD. SUITE 3202 AUSTIN, TX 78759 US	11410 JOLLYVILLE RD. SUITE 3202 AUSTIN, TX 78759 US

2. Principal Place of Business		3. Mailing Address	
16770 Hedgecroft		16770 Hedgecroft	
Suite, Apt. #, etc.: Suite 710		Suite, Apt. #, etc.: Suite 710	
City & State: Houston, Texas		City & State: Houston, Texas	
Zip: 77060	Country: USA	Zip: 77060	Country: USA

4. FEI Number: 59-3258213 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCDONALD, STEPHEN J
315 SE 7TH STREET STE. 303
FORT LAUDERDALE, FL 33301

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 [signature] V.P. STEVEN R. BUB
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

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

10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ANDREWS, CECIL D 4010 LONGCHAMP DR. #22 AUSTIN, TX 78746	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP Bob Wallace 16770 Hedgecroft Suite 710 Houston TX 77060	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREWS, DONNA J 4010 LONGCHAMP DR. #22 AUSTIN, TX 78746	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	OVP Steve Bub 16770 Hedgecroft Suite 710 Houston, TX 77060	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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] 9-20-04 281-999-8177
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #