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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

**FILED** Feb 12 1998 8:00am Secretary of State

SIPCO	SERVICES & MARINE, INC	<i>)</i> ,						
Principal Plac	e of Business	Mailing Address				- I INNINE INFO DILIU DIADA ILUFA CURED PHE DIDE		1907 BIOTI 1907
18150 H-45 NORTH 18150 H-45 NORTH								
WILLIS TX 77378-6918 WILLIS TX 77378-6918								
us us						DO NOT WRITE IN THIS SPACE		
j						3. Date Incorporated or Qualified		
9 Principal D	face of Business					04/12/1983		
21 Principal P	lace of business	2a. Malling Addross				4. FEI Number	— <del>— —</del>	Applied For
Suite, Apt.	# etc	Suite, Apt #, etc.				76-0028226		Not Applicable
22		27]				6. Certificate of Status Desired	* *	Additional Required
City & State		City & State		6. Election Campaign Financing		·····		
23		28			Trust Fund Contribution		May Be d to Fees	
Zip	Country			ntry		8. This corporation owes or has paid the		
24	25 29 30		30			Personal Property Tax due June 30.  Yes No		
9, Name and Address of Curre		nt Registered Agent				10. Name and Address of New Registe	red Agent	
CT	CORPORATION SYSTEM			<b>61</b> Na	ame			
12	00 S. PINE ISLAND ROAD		ŀ	<b>B2</b> Str	eet Addres	ss (P.O. Box Number is Not Acceptable)		
PL	ANTATION FL 33324							
			1	83				
			}	<b>84</b> Cit	lv		85 Zip	p Code
					•		┡┖╏	
11. Pursuant	to the provisions of Sections 607.050	ration submits this statement for the purpor	se 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								•
l	Signature, typed or proted name of registered age	····		Agent sign	nature required	( when reinstating) DA		
12.	PD OFFICERS AN	ID DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFFICERS		
NAME	BROCK, R R	ב טנננין					☐ Change	Addition
STREET ADDRESS	18150 IH-45 NORTH		1.2 NAME					
	WILUS TX 77378-6918		1.3 STREET ADDRESS		155			
CITY-ST-ZIP TITLE	V	DELETE	21 TIT	Y-ST-ZIP			☐ Change	Addition
NAME	SHANLEY, R P	C. J. Dr. Cert.	2.2 NA					LI AGUITOII
STREET ADDRESS	40244 PADO DO			2.3 STREET ADDRESS				
CITY-ST-ZIP	PRAIRIEVILLE LA			2. 4 CITY-ST-ZIP				
TITLE	VSTD			3.1 TITLE			Change	Addition
NAME	TWIDAL, PETER	☐ DELETE	3.2 NA			,		
STREET ADDRESS	18150 IH-45 NORTH			reet addri	ESS			Ì
CITY-ST-ZIP	WILLIS TX 77378-6918			TY - ST - ZIP				į
TITLE	VD	DELETE	4.1 ¥(T		····		☐ Change	☐ Addition
NAME	HEARN, W. X		4.2 NA	ME			•	
STREET ADDRESS	18150 H-45 NORTH		4.3 STF	4.3 STREET ADDRESS				1
CITY-ST-ZIP	WILLIS TX 77378-6918			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TIT		1		☐ Change	Addition
NAME			5.2 NA	5.2 NAME				
STREET ADDRESS			5 3 STF	5 3 STREET ADDRES				į
CITY-ST-ZIP			5.4 CIT	Y-S1-Z#P				ļ
TITLE		DELETE	6.1 TIT				Change	Addition
NAME			6.2 NA	ME	1			
STREET ADDRESS			6.3 STF	ieet addri	ESS			- 1
CITY-ST-ZIP				Y-ST-ZIP				
14. Thereby o	ertify that the information supplied wi	ith this filing does not qualify	v for the exer	motion a	stated in Se	ection 119.07(3)(i), Florida Statutes. I furthe	or certify that th	e 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, or on an attachment with an address.

SIGNATURE:

01-29-98

409-344-4444