

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90409 031 \*\*\*150.00

**DOCUMENT # F00000001049**

1. Entity Name  
**AZURIX NORTH AMERICA (USA), INC.**

Principal Place of Business 1400 SMITH ST HOUSTON TX 77002	Mailing Address 1400 SMITH ST HOUSTON TX 77002
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00044120



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address <i>600 Jefferson</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc. <i>JFR507B</i>
City & State	City & State <i>Houston, TX</i>
Zip	Country <i>USA</i>

4. FEI Number <b>98-0165920</b>	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

6. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b>
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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DERRICK, JAMES V JR</b> <b>1400 SMITH STREET</b> <b>HOUSTON TX 77002</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>ALE, JOHN C</b> <b>1400 SMITH STREET</b> <b>HOUSTON TX 77002</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ANDERSON, J MICHAEL</b> <b>1400 SMITH STREET</b> <b>HOUSTON TX 77002</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>STOKES, JOHN M</b> <b>1400 SMITH STREET</b> <b>HOUSTON TX 77002</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>SMITH, R LAIRD</b> <b>1400 SMITH STREET</b> <b>HOUSTON TX 77002</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>SPENCER, G STANLEY</b> <b>1400 SMITH STREET</b> <b>HOUSTON TX 77002</b>	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

*(see attachment)*

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kate P. Cole* **4/19/01** **713-853-1712**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
*Kate P. Cole Assistant Secretary*

CR2E034 (10/00)

Attachment  
~~# F000000001049~~  
D0044120

Azurix North America (USA), Inc.

Status: Active  
Internal No: 62J PUMD  
Formation:  
Delaware

Federal ID #: Pending

Primary Address:

100 King Street West  
P.O.Box 2440  
LCD 1  
Hamilton Ontario L8N 4J6

DIRECTORS:

Title:

John C. Ale  
J. Michael Anderson  
James V. Derrick, Jr.

Director  
Director  
Director

OFFICERS:

Title:

John M. Stokes  
John C. Ale  
Amanda K. Martin  
R. Laird Smith  
G. Stanley Spencer  
Norma A. Tidrow  
David W. Glassford  
Stephen M. Brooke  
Kate B. Cole

President  
Vice President  
Vice President  
Vice President  
Vice President  
Secretary  
Treasurer  
Assistant Secretary  
Assistant Secretary