

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001129

Entity Name: PRAXAIR SERVICES, INC.

FILED
Jan 21, 2004
Secretary of State

Current Principal Place of Business:

222 PENNBRIGHT
SUITE 300
HOUSTON, TX 77090 US

New Principal Place of Business:

Current Mailing Address:

PRAXAIR INC - STATE INCOME TAXES 12
39 OLD RIDGEBURY RD
DANBURY, CT 068105113 US

New Mailing Address:

FEI Number: 74-1395600 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE HALL CORP. SYSTEM, INC.
110 NORTH MAGNOLIA STREET
STE. 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: CAPPELLO, JOSEPH
Address: 39 OLD RIDGEBURY ROAD
City-St-Zip: DANBURY, CT 068105113

Title: AT () Delete
Name: SAYMOUR, MARK
Address: 39 OLD RIDGEBURY RD
City-St-Zip: DANBURY, CT 068105713

Title: S () Delete
Name: BASSETT, R A
Address: 39 OLD RIDGEBURY ROAD
City-St-Zip: DANBURY, CT 068105113

Title: T () Delete
Name: ALLEN, MICHEAL J
Address: 39 OLD RIDGEBURY ROAD
City-St-Zip: DANBURY, CT 068105113

Title: D () Delete
Name: FUCHS, JAMES J
Address: 39 OLD RIDGEBURY ROAD
City-St-Zip: DANBURY, CT 068105113

Title: AS () Delete
Name: LYON, MARK S
Address: 39 OLD RIDGEBURY ROAD
City-St-Zip: DANBURY, CT 068105113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: SEYMOUR, S. MARK
Address: 39 OLD RIDGEBURY RD
City-St-Zip: DANBURY, CT 068105713

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. MARK SEYMOUR

AT

01/21/2004

Electronic Signature of Signing Officer or Director

_____ Date