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Apr 02, 1999 8:00 am  
Secretary of State

04-02-1999 90082 036 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000000665

1. Corporation Name  
EXXON WORLDWIDE TRADING COMPANY



DO NOT WRITE IN THIS SPACE

Principal Place of Business

200 PARK AVENUE  
FLORHAM PARK NJ 07932  
US

Mailing Address

P.O. BOX 392  
ROOM 323  
HOUSTON TX 77001-0392  
US

3. Date Incorporated or Qualified

02/10/1994

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

4. FEI Number

59-1708847

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME HOUSTON, D.M.  
STREET ADDRESS 200 PARK AVENUE  
CITY-ST-ZIP FLORHAM PARK NJ

DELETE

TITLE D  
NAME FITZGERALD, C. M.  
STREET ADDRESS 396 ALHAMBRA CIR.  
CITY-ST-ZIP CORAL GABLES FL

DELETE

TITLE VD  
NAME OLSEN, G. E.  
STREET ADDRESS 396 ALHAMBRA CIR.  
CITY-ST-ZIP CORAL GABLES FL

DELETE

TITLE S  
NAME TAULE, D R  
STREET ADDRESS 200 PARK AVENUE  
CITY-ST-ZIP FLORHAM PARK NJ 07932

DELETE

TITLE T  
NAME VARMA, C. K.  
STREET ADDRESS 200 PARK AVENUE  
CITY-ST-ZIP FLORHAM PARK NJ

DELETE

TITLE AS  
NAME LYNCH, JOSEPH G.  
STREET ADDRESS 800 BELL STREET,  
CITY-ST-ZIP HOUSTON TX

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: Joseph G. Lynch, Assistant Secretary 3-29-99 (713) 656-1807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034-(11/98)