


**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91453 047 \*\*\*150.00

DOCUMENT # **P06923**

1. Entity Name  
**CBI SERVICES, INC.**



Principal Place of Business  
**1501 NORTH DIVISION  
PLAINFIELD IL 60544  
US**

Mailing Address  
**1501 NORTH DIVISION  
PLAINFIELD IL 60544  
US**

2. Principal Place of Business  
**1503 N. Division St.**

3. Mailing Address  
**1503 N. Division**

Suite, Apt. #, etc.

City & State  
**Plainfield, IL**

City & State  
**Plainfield, IL**

Zip  
**60544**

Country  
**US**

4. FEI Number **36-3369071**

Applied For  
 Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. 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 **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 \_\_\_\_\_ DATE \_\_\_\_\_

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <input type="checkbox"/> Delete <b>RUSSELL, R.S.</b> <b>211 RYAN CT</b> <b>ARLINGTON HGTS IL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <input checked="" type="checkbox"/> Delete <b>PLANIC, DENNIS</b> <b>ST GEORGE RD</b> <b>BURR RIDGE IL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>GLENN, GERALD M</b> <b>413 WEST WALNUT</b> <b>HINSDALE IL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <input type="checkbox"/> Delete <b>BOLLWEG, JIM</b> <b>611 STEAMBOAT RD</b> <b>NAPERVILLE IL 60565</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Scott Russell</b> <b>14 Snow Pond Place</b> <b>The Woodlands, TX 77382</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Terrence G. Browne</b> <b>6946 N. Oleander Avenue</b> <b>Chicago, IL 60631</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Gerald M. Glenn</b> <b>23 Cypress Lake Place</b> <b>The Woodlands, TX 77382</b>
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

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 an other like empowered.

SIGNATURE: *Scott Russell* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E034 (10/02)

attachment 90127803  
#PO6923

CORPORATION DESCRIPTIVE INFORMATION

Code: 1100SERV40 Name: CBI SERVICES, INC.

Employee ID: 36-3369071

Corporate Officers

Officer Name JIM E. BOLLWEG  
Street Address 611 STEAMBOAT ROAD  
City NAPERVILLE  
State IL  
Zip 60565  
SSN 334-46-1282  
Title PRESIDENT

Officer Name  
Street Address  
City  
State  
Zip  
SSN  
Title

Officer Name R. SCOTT RUSSELL  
Street Address 14 SNOW POND PLACE  
City THE WOODLANDS  
State TX  
Zip 77382  
SSN 340-48-6839  
Title SECRETARY

Officer Name TERRENCE G. BROWNE  
Street Address 6946 N. OLEANDER AVENUE  
City CHICAGO  
State IL  
Zip 60631  
SSN 348-44-4512  
Title TREASURER

Attachment

90127803

#P06923

CORPORATION DESCRIPTIVE INFORMATION

Code: 1100SERV40 Name: CBI SERVICES, INC.

Employee ID: 36-3369071

Ownership

Common Stock Authorize	1,000,000
Issued	11,000
Par Value	1.00
Preferred Stock Authorize	
Issued	
Par Value	

States which subsidiary is subject to income tax LISTING ATTACHED

Parent Corp Name	CHICAGO BRIDGE & IRON COMPANY
FEIN	06-1477022
Owned	100%
Address	8701 NEW TRAILS DRIVE, SUITE 200
City	THE WOODLANDS
County	MONTGOMERY
State	TX
Zip	77380
Country	USA

State which Parent is subject to income tax LISTING ATTACHED

Grand Parent Name  
FEIN  
Address  
City  
State  
Zip

Prior Name  
FEIN  
Prior Address  
City  
State  
Zip  
Date Changed  
Reason

attachment

90127803

#P06923

**CORPORATION DESCRIPTIVE INFORMATION**

**CBI SERVICES, INC. - DIRECTORS**

**EMPLOYEE ID: 36-3369071**

**JIM E. BOLLWEG**  
611 STEAMBOAT ROAD  
NAPERVILLE, IL 60565

**TERRENCE G. BROWNE**  
6946 N. OLEANDER AVENUE  
CHICAGO, IL 60631

**GERALD M. GLENN**  
23 CYPRESS LAKE PLACE  
THE WOODLANDS, TX 77382