

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 30 AM 8: 57

DOCUMENT # P14861 (9)

1. Corporation Name

BAKER HUGHES INCORPORATED

Principal Place of Business

**3900 ESSEX LANE
SUITE 1200
HOUSTON TX 77027**

Mailing Address

**3900 ESSEX LANE
SUITE 1200
HOUSTON TX 77027**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/16/1987

3a. Date of Last Report

04/22/1994

4. FEI Number

76-0207995

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 the corporation)

Signature (typed or printed name of registered agent and the corporation)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VPT
NAME	MATTSON, ERIC L
STREET ADDRESS	3900 ESSEX LANE, S-1200
CITY, ST, ZIP	HOUSTON TX
TITLE	PD
NAME	WOODS, JAMES D.
STREET ADDRESS	3900 ESSEX LANE, S-1200
CITY, ST, ZIP	HOUSTON TX
TITLE	V
NAME	LUKENS, MAX L.
STREET ADDRESS	3900 ESSEX LANE, S-1200
CITY, ST, ZIP	HOUSTON TX
TITLE	V
NAME	MYERS, FRANKLIN
STREET ADDRESS	3900 ESSEX LANE, S-1200
CITY, ST, ZIP	HOUSTON TX
TITLE	AS
NAME	SMITH, LINDA J
STREET ADDRESS	3900 ESSEX LANE, S-1200
CITY, ST, ZIP	HOUSTON TX
TITLE	V
NAME	FINLEY, GEORGE S
STREET ADDRESS	3900 ESSEX LANE, S-1200
CITY, ST, ZIP	HOUSTON TX

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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 affidavit with an address.

SIGNATURE:

Linda J. Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/95

713 439 8600
Telephone Number