-- COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P33171

(0)

10777 WESTHEIMER STE 625

Mailing Address

PETROBRAS AMERICA INC.

Principal Place of Business
WESTHEIMER RD.

| 3. Date incorporated or Qualified (03/12/1991 (03/12/1 | 1200<br>TX 77042 |  | HOUSTON TX 77042                |                     |             |                                       | DO NOT WRITE IN THIS SPACE                     |   |          |
|--|------------------|--|---------------------------------|---------------------|-------------|---------------------------------------|--|---|----------|
| 2. Principal Place of Business   |                  | K 7/U42                                    |                                 |                     |             |                                       |  |   |          |
| Principle Place of Business   2a, Mailing Address   4, FEI Number   Applied For   10 Time   10 Destruction   10 Destruction   25 Destruction   |                  |  |                                 |                     |             |                                       |  |   | İ        |
| Suite, Apt. #, etc.    |                  |  |                                 |                     |             |                                       |  | A-ried Con  | $\dashv$ |
| Suite, Apt. #, etc.    Suite, Apt. #, etc.   |                  | · · · · · · · · · · · · · · · · · · ·      |                                 |                     | 1           |                                       | 1  | <del>    ''                                </del> |          |
| Suite  |                  | · · · · · · · · · · · · · · · · · · ·      |                                 |                     |             |                                       |  |   |          |
| City & State    City & State   City & State   City & State   City & State   City & State   City & State   Country   Tust Fund Contribution   Added to Fees   |                  |  | <b>⊢</b> ''''                   | Suite, Apt. #, etc. |             |                                       | 5. Certificate of Status Desired               |   |          |
| Houston   Two   Zip  | Suite # 1200     |  |                                 |                     |             |                                       |  |   | -        |
| Total Country   Zip      |                  | , <del></del>                              | <b>⊢</b> ′                      | ¬ ´                 |             |                                       | 1 1 1  |   |          |
| 9. Name and Address of Current Registered Agent  GRILLI, PETER J ESO 100 SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  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, and accept the obligations of, section 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, and accept the obligations of, section 607.0502, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating)  DATE  22. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LAURAGE  LA |                  |  |                                 |                     |             |                                       |  |   |          |
| 9. Name and Address of Current Registered Agent  GRILLI, PETER J ESO 100 SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  10. South Ashley DRIVE STE 1300 TAMPA FL 33602  10. South Ashley DRIVE STE 1300 TAMPA FL 33602  10. South Ashley DRIVE STE 1300 TAMPA FL 33602  10. South Ashley DRIVE STE 1300 TAMPA FL 33602  10. South Ashley DRIVE STE 1300 TAMPA FL 33602  10. South Ashley DRIVE STE 1300 TAMPA FL 33602  10. DELETE SITUATION SITUATIO |                  | , —  | Zip                             | Cour                | try         |                                       | 1  |   |          |
| GRILLI, PETER J ESQ 100 SOUTH ASHLEY DRIVE STE 1300 TAMPA FL 33602  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  87 City FL 85 Zip Code  88 City FL 85 Zip Code  89 City FL 85 Zip Code  89 City FL 85 Zip Code  80 City FL 85 Zip Code  80 City FL 85 Zip Code  80 City FL 85 Zip Code  81 City FL 85 Zip Code  81 City FL 85 Zip Code  82 Zip Code  83 Zip Code  84 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  86 Zip Code  86 Zip Code  87 Zip Code  88 Zip Code  89 Zip Code  80 Zip Code  80 Zip Code  80 Zip Code  80 Z | ; 7 <u>7</u>     |  |                                 | 30                  |             |                                       |  |   |          |
| TAMPA FL 33602  82 Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84 City   FL   85 Zip Code   83   84 City   FL   85 Zip Code   85 Zip Code   86 Zip  |                  | 9. Name and Address of Curren              | t Registered Agent              |                     | - 1         |                                       | 10. Name and Address of New Register           | ad Agent  |          |
| TAMPA FL 33602  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, in an familiar with, and accept the obligations of, section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, section 607.0505, 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, or both, in the State of Florida, Such change was authorized by the 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, or both, in the State of Florida, Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both of directors. I hereby accept the appointment as registered agent and the figure agent and the figure appointment as registered agent and the figure appointment as registered agent and the figure appointment as registered agent and the figure appointment are registered agent and the figure appointment agent an | GF               | RILLI, PETER J ESQ                         |                                 | · ·                 | 81 Na       | ne                                    |  |   |          |
| TAMPA FL 33602  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, in an familiar with, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and tile if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  DELETE  1.1 TITLE  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS  RIO DE JANEIRO BRAZIL  DELETE  2.1 TITLE  2.1 TITLE  Change Addition  DELETE  2.1 TITLE  2.1 TITLE  Change Addition  DELETE  2.1 TITLE  2.1 TITLE  2.1 TITLE  3.2 TAME  4.2 CAM: 3.2 GO: 3.0R.G.S.  RIO DE JANEIRO BRAZIL  2.1 TITLE  2.1 TITLE  2.1 TITLE  3.2 TAME  4.2 CAM: 3.2 GO: 3.0R.G.S.  RIO DE JANEIRO BRAZIL  2.1 TITLE  2.1 TITLE  2.1 TITLE  3.2 TAME  4.2 CAM: 3.2 GO: 3.0R.G.S.  RIO DE JANEIRO BRAZIL  2.1 TITLE  2.1 TITLE  3.2 TAME  3.3 STREET ADDRESS  RIO DE JANEIRO BRAZIL  2.1 TITLE  2.1 TITLE  3.1 TITLE  3.1 TITLE  4.2 CAM: 3.2 GO: 3.0R.G.S.  RIO DE JANEIRO BRAZIL  2.1 TITLE  2.1 TITLE  3.1 TITLE  3.1 TITLE  4.2 CAM: 3.2 GO: 3.0R.G.S.  RIO DE JANEIRO BRAZIL  2.1 TITLE  3.1 TITLE  3.1 TITLE  4.2 TAME  4.2 CAM: 3.2 GO: 3.0R.G.S.  RIO DE JANEIRO BRAZIL  2.1 TITLE  3.1 TITLE  3.1 TITLE  4.2 TAME  4.2 CAM: 3.2 GO: 3.0R.G.S.  RIO DE JANEIRO BRAZIL  4.2 CITY-ST-ZIP  Addition  RIO DE JANEIRO BRAZIL  4.2 CITY-ST-ZIP  Addition  3.3 STREET ADDRESS  3.4 GFN-SR-AL-CANABARRO 500  RIO DE JANEIRO BRAZIL  4.2 CITY-ST-ZIP  Addition  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  Addition  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP   | 10               | O SOUTH ASHLEY DRIVE STE 130               | 0                               |                     | 32 Stre     | et Addre                              | ss (P.O. Box Number is Not Acceptable)         |   | -        |
| 83   84   City   FL   85   Zip Code  | TA               | MPA FL 33602                               |                                 |                     |             | , , , , , , , , , , , , , , , , , , , |  |   |          |
| In 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 agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.    Interest   |                  |  |                                 | Ī                   | 83          |                                       |  |   |          |
| In 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 agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.    Interest   |                  |  |                                 |                     |             |                                       |  |   |          |
| 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 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, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  CD BARBOSA, JOSE C RUA GENERAL CANABARRO 500 RIO DE JANEIRO BRAZIL DELETE DE |                  |  |                                 |                     | B4 City     | ′                                     | F  | B5 Zip Code                                       | 1        |
| 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 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 eignature required when reinstature))   DATE  | 11 Duraus        | ent to the provisions of sections 607.050  | and 607 1509 Florida Statut     | oe the abo          | ve-name     | d comor                               |  |   |          |
| SIGNATURE    Signature, typed or printed name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstating)   DATE   | office o         | or registered agent, or both, in the State | of Florida. Such change was     | authorized          | by the c    | orporatio                             | n's board of directors. I hereby accept the ap | pointment as registered                           |          |
| Signature, typed or printed name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstating)  2. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  CD DELETE  1.1 TITLE  BARBOSA, JOSE C  RUA GENERAL CANABARRO 500  1.3 STREET ADDRESS  RIO DE JANEIRO BRAZIL  DELETE  2.1 TITLE  D Change Addition  1.4 CITY-ST-ZIP  DELETE  2.1 TITLE  D Change Addition  2.2 NAME  C A N'A Z G O/JORG 5  RUA GENERAL CANABARRO 500  2.3 STREET ADDRESS  RIO DE JANERIO BRAZIL  DELETE  2.1 TITLE  D C A N'A Z G O/JORG 5  RUA GENERAL CANABARRO 500  2.3 STREET ADDRESS  RIO DE JANERIO BRAZIL  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  Addition  REIS, LUIZ ANTONIO  3.2 NAME  3.3 STREET ADDRESS  814 DARIA  4.3 STREET ADDRESS  3.4 CITY-ST-ZIP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Addition  Addition  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  HOUSTON TX 77079  | agent.           | I am familiar with, and accept the obliga  | ations of, section 607.0505, Fi | lorida Statu        | tes.        |                                       |  |   | ì        |
| OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  CD  | SIGNATUR         |  | ot and title of applicable /A   | IOTE: Registers     | d Anent eld | natura remit                          | red when rejectation) DATI                     |   |          |
| DELETE 1.1 TITLE   | 12               |  |                                 |                     |             |                                       |  |   |          |
| BARBOSA, JOSE C RIUA GENERAL CANABARRO 500 RIO DE JANEIRO BRAZIL D D DELETE D D Change Addition BERTANI, RENATO T RUA GENERAL CANABARRO 500 RIO DE JANEIRO BRAZIL D Change Addition CANAR GO JORGE RUA GENERAL CANABARRO 500 RIO DE JANERIO BRAZIL D DELETE D DELETE D DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS RIO DE JANEIRO BRAZIL D DELETE REIS, LUIZ ANTONIO 814 DARIA HOUSTON TX 77079 3.4 CITY-ST-ZIP BARBOSA, JOSE C 1.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.5 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.5 NAME 3.5 STREET ADDRESS 3.4 CITY-ST-ZIP   | IILE             |  |                                 |                     | E           |                                       |  |   |          |
| RUA GENERAL CANABARRO 500 RIO DE JANEIRO BRAZIL  D DELETE 3.1 TITLE DELETE DELETE 3.2 NAME 3.3 STREET ADDRESS B14 DARIA DELETE DELETE 3.4 CTY-ST-ZIP DELETE DELETE 3.5 NAME 3.5 NAME 3.6 |                  |  | L DELETE                        | ı.                  |             |                                       |  | criange radii                                     |          |
| RIO DE JANEIRO BRAZIL  D DELETE  D DELETE  2.1 TITLE  D Change Addition  2.2 NAME  C A NIAZ G O TORGE  RUA GENERAL CANABARRO 500  RIO DE JANERIO BRAZIL  PD DELETE  3.1 TITLE  DELETE 3.1 TITLE  PD REIS, LUIZ ANTONIO  814 DARIA  3.3 STREET ADDRESS 814 DARIA  HOUSTON TX 77079  3.4 CITY-ST-ZIP  3.4 CITY-ST-ZIP  3.4 CITY-ST-ZIP  3.5 TREET ADDRESS 3.4 CITY-ST-ZIP  3.4 CITY-ST-ZIP  3.5 TREET ADDRESS 3.4 CITY-ST-ZIP  |                  |  | :00                             | B                   |             | ·ce                                   |  |   |          |
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| BERTANI, RENATO T RUA GENERAL CANABARRO 500 RIO DE JANERIO BRAZIL PD DELETE REIS, LUIZ ANTONIO 814 DARIA 814 DARIA HOUSTON TX 77079  22 NAME 23 STREET ADDRESS 24 GENERAL CANABARRO 500 24 CITY-ST-ZIP 27 NAME 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 4.4 CITY-ST-ZIP 3.1 TITLE 3.3 STREET ADDRESS 4.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP  |                  | • _  |                                 |                     |             |                                       |  |   |          |
| RIO DE JANERIO BHAZIL   24 CITY-ST-ZIP   R.O DE JAN E 20 (3 2.4 2)   | HILE             |  | L DELETE                        |                     |             |                                       | and the same                                   |   | ion      |
| RIO DE JANERIO BRAZIL   24 CITY-ST-ZIP   RIO DE JANERIO BRAZIL   PD  | -                | ·  |                                 | 1                   | _           | CA                                    | MAZGO, TORGE                                   |   |          |
| RIO DE JANERIO BRAZIL   24 CITY-ST-ZIP   RIO DE JANERIO BRAZIL   PD  | ···· I ADDINES   |  | 600                             | 2.3 \$TR            | EET ADDRE   | ss Zu                                 | t General C4 Nabarro 5                         | 00  |          |
| REIS, LUIZ ANTONIO 3.2 NAME 814 DARIA 3.3 STREET ADDRESS HOUSTON TX 77079 3.4 CITY-ST-ZIP  | - · VID          | RIO DE JANERIO BRAZIL                      |                                 | 2.4 CIT             | /-ST-ZIP    | Ric                                   | DE JANFIRO BRAZIL                              |   |          |
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| HOUSTON TX 77079 3.4 CITY-ST-ZIP   |                  | REIS, LUIZ ANTONIO                         |                                 | 3.2 NAA             | Œ           |                                       |  |   |          |
|  | ··· I ALEDRO-S   | · ·  |                                 | 3.3 STR             | EET ADORE   | ss                                    |  |   | -        |
|  | /IV              | HOUSTON TX 77079                           |                                 | 3.4 C/T             | -ST-ZIP     |                                       |  |   |          |
| Defere   |                  |  | nei ete                         |                     |             |                                       |  | Change Addi:                                      | ion      |
| NAHAS NETO, JORGE J ■ 4.2 NAME   |                  | T  |                                 |                     |             |                                       |  |   |          |
| 13407 KIMBERLEY 4.3 STREET ADDRESS   |                  |  |                                 |                     |             | 88                                    |  |   |          |

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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE 5.2 NAME

6.1 TITLE 6.2 NAME

SIGNATUR

---- I ADDRESS

····· I ATENTINA

**HOUSTON TX** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

DELETE

DELETE

090398

Osytime Phone

**FILED** 

Sep 09, 1998 8:00 am Secretary of State

R2F034 (5/