2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000005587

Entity Name: SOUTHERN PETROLEUM LABORATORIES, INC.

The state of the s

Current Principal Place of Business:

101 IBEX LN.

BROUSSARD, LA 70518

Current Mailing Address:

101 IBEX LN.

BROUSSARD, LA 70518 US

FEI Number: 81-3830464 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Mar 09. 2023

Secretary of State

5503465772CC

Officer/Director Detail:

TitlePRESIDENT/CEOTitleTREASURER/CFONameHIBBELER, JEFFNamePERE, BRANDONAddress8850 INTERCHANGE DR.Address101 IBEX LN.

City-State-Zip: HOUSTON TX 77054 City-State-Zip: BROUSSARD LA 70518

Title VP Title VP

NameGRIEPP, TIMNameMAYEAUX, NICKAddress101 IBEX LN.Address101 IBEX LN.

City-State-Zip: BROUSSARD LA 70518 City-State-Zip: BROUSSARD LA 70518

TitleDIRECTORTitleDIRECTORNameSMITH, DAVIDNameHEGLIE, ERICAddress4211 AUSTIN RIDGE DR.Address101 MISSION ST

STE 1500

SAINT CHARLES MO 63304 City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR Title DIRECTOR

Name TITTIGER, GOTTFRIED Name FERNANDEZ, MATTSON

Address 101 MISSION ST STE 1500 Address 101 MISSION ST

STE 1500

City-State-Zip: SAN FRANCISCO CA 94105 City-State-Zip: SAN FRANCISCO CA 94105

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: BRANDON PERE TREASURER/CFO 03/09/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

MCRAE, BRUCE

Name

DIRECTOR Title Title DIRECTOR Name BROWN, CHRISTOPHER CONLON, JOE Name Address 101 IBEX LN. Address 250 FIRST AVE.

City-State-Zip: NEEDHAM MA 02494 City-State-Zip: BROUSSARD LA 70518

Title DIRECTOR Title **DIRECTOR** Name PEISER, BRIAN

900 N. MICHIGAN AVENUE Address 250 FIRST AVE. Address

SUITE 1800

City-State-Zip: NEEDHAM MA 02494 City-State-Zip: CHICAGO IL 60611

Title **DIRECTOR** Title DIRECTOR FREAL, JOHN Name

CARGILE, RICHARD Name 1521 WESTBRANCH DRIVE Address Address 19410 PUGET LN. SUITE 100

City-State-Zip: SPRING TX 77388 MCLEAN VA 22102 City-State-Zip:

Title DIRECTOR Title DIRECTOR Name MILNE, IAN Name KIRTLEY, J. ROSS

Address 101 IBEX LN. 10501 CRYSTAL CREEK DR. Address

City-State-Zip: BROUSSARD LA 70518 MUSTANG OK 73064 City-State-Zip: