

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Sep 19 1997 8:00am  
Secretary of State

DOCUMENT # 617461

(9)

1. Corporation Name

CHARTER OIL (BAHAMAS), INC.



Principal Place of Business

5700 WILSHIRE BOULEVARD  
SUITE 575  
LOS ANGELES CA 90036-3659

Mailing Address

5700 WILSHIRE BOULEVARD  
SUITE 575  
LOS ANGELES CA 90036-3659

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1979

3a. Date of Last Report

08/01/1996

4. FEI Number

59-1948608

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

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 EVD ☐ DELETE

NAME CARSON, THOMAS P  
STREET ADDRESS 5700 WILSHIRE BOULEVARD  
CITY-ST-ZIP LOS ANGELES CA

TITLE VAS ☐ DELETE

NAME ROSS, JOHN E  
STREET ADDRESS 4655 SALISBURY RD STE 399  
CITY-ST-ZIP JACKSONVILLE FL

TITLE SVS ☐ DELETE

NAME SUCHIL, SALLY  
STREET ADDRESS 5700 WILSHIRE BLVD STE 575  
CITY-ST-ZIP LOS ANGELES CA

TITLE SVCT ☐ DELETE

NAME COUGHLAN, KATHLEEN  
STREET ADDRESS 5700 WILSHIRE BOULEVARD  
CITY-ST-ZIP LOS ANGELES CA

TITLE PD ☐ DELETE

NAME BACHMANN, PETER H  
STREET ADDRESS 5700 WILSHIRE BOULEVARD  
CITY-ST-ZIP LOS ANGELES CA

TITLE VAT ☐ DELETE

NAME LANDSBAUM, ROSS G  
STREET ADDRESS 5700 WILSHIRE BLVD STE 575  
CITY-ST-ZIP LOS ANGELES CA

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 do 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.

SIGNATURE:

*[Signature]*

September 16, 1997

904-281-4488

CR2E034 (4/97)