

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 819012 (6)

1. Corporation Name

THE PURE OIL CORPORATION



Principal Place of Business

1201 W. FIFTH ST.
INCOME TAX DEPARTMENT
LOS ANGELES CA 90017
US

Mailing Address

1201 W. FIFTH ST.
INCOME TAX DEPARTMENT
LOS ANGELES CA 90017
US

3. Date Incorporated or Qualified

09/07/1965

3a. Date of Last Report

05/01/1995

4. FEI Number

13-6183678

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 2141 Rosecrans Ave., Ste. 4000

Suite Apt #, etc.

22 Tax Dept., Ste. 4091.1

City & State

23 El Segundo, CA

Zip

90245

Country

2a. Mailing Address

26 2141 Rosecrans Ave., Ste. 4000

Suite Apt #, etc.

27 Tax Dept., Ste. 4091.1

City & State

28 El Segundo, CA

Zip

90245

Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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 of Registered Agent required for change of registered agent)

(Signature of Registered Agent required for change of registered office)

DATE

12. OFFICERS AND DIRECTORS

TITLE	V	☐ DELETE
NAME	SCHIAVI, C R	
STREET ADDRESS	1201 W. FIFTH STREET	
CITY-ST-ZIP	LOS ANGELES CA	
TITLE	V	☐ DELETE
NAME	SCHLAX, R M	
STREET ADDRESS	1201 W. FIFTH ST.	
CITY-ST-ZIP	LOS ANGELES CA	
TITLE	PD	☐ DELETE
NAME	BEACH, R. C.	
STREET ADDRESS	1201 WEST FIFTH STREET	
CITY-ST-ZIP	LOS ANGELES CA	
TITLE	S	☐ DELETE
NAME	CODON, D. P.	
STREET ADDRESS	1201 W. FIFTH ST.	
CITY-ST-ZIP	LOS ANGELES CA	
TITLE	TS	☐ DELETE
NAME	WALTON, R. L	
STREET ADDRESS	1201 WEST FIFTH ST	
CITY-ST-ZIP	LOS ANGELES CA	
TITLE	T	☐ DELETE
NAME	CHESSUM, D. D.	
STREET ADDRESS	1201 W. FIFTH ST.	
CITY-ST-ZIP	LOS ANGELES CA	

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2141 Rosecrans Ave., Ste. 4000
El Segundo, CA 90245

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2141 Rosecrans Ave., Ste. 4000
El Segundo, CA 90245

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

2141 Rosecrans Ave., Ste. 4000
El Segundo, CA 90245

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

2141 Rosecrans Ave., Ste. 4000
El Segundo, CA 90245

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

2141 Rosecrans Ave., Ste. 4000
El Segundo, CA 90245

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

2141 Rosecrans Ave., Ste. 4000
El Segundo, CA 90245

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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 119.07(3)(k), 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:

DD Chessum

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DD Chessum

Treasurer

4/9/96

Date

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