2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State
03-15-2004 90074 004 ***150.00

DOCUMENT # 837344

1. Entity Name

SCHLUMBERGERSEMA INC.

Principal Place of Business	Mailing Address
TAX DEPT. 30000 MILL CREEK AVENUE STE. 100 ALPHARETTA GA 30022 US	5599 SAN ~~ECLIPSE~~ FELIPE ~~5~~400 MD 8-5 HOUSTON TX 77056 US

MOORE CR2E034 (11/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 51-0204865 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PFERDEHIRT, DOUGLAS 5599 SAN FELIPE STE 400 HOUSTON TX 77056	☒ Delete	P PAUL STEWART 5599 SAN FELIPE St 300 Houston, TX 77056	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MCCORMACK, MARY 5599 SAN FELIPE STE 400 HOUSTON TX 77056	☒ Delete	VP MARK CURRAN 5599 San Felipe St 300 Houston, TX 77056	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ZITO, MICHAEL 100 MILTON PK 30000 MILL CRK AV STE 100 ALPHARETTA GA 30022	☒ Delete	VP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FLANNERY, COLIN 100 MILTON PK 30000 MILL CRK AV STE 100 ALPHARETTA GA 30022	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ATS GORDON, MICHELLE 5599 SAN FELIPE STE 400 HOUSTON TX 77056	☒ Delete	ATS Randolph Houchins 100 milton PARK 30000 mill CRK St 100 ALPHARETTA, GA 30022	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2/27/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #