

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 838888 (6)

1. Corporation Name

SEARIVER MARITIME FINANCIAL HOLDINGS, INC.

Principal Place of Business

800 BELL ST., ROOM 493
P.O. BOX 392
HOUSTON TX 77002

Mailing Address

800 BELL ST., RM 323
P. O. BOX 392
HOUSTON TX 77001
US

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 for Principal Place of Business (if changed agent or office, file only)

(If the Registered Agent is a corporation, file only)

(If)

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD
TATKON, CAROL A.

[] DELETE

11 TITLE

PD

[X] Change

[] Addition

NAME

800 BELL STREET

12 NAME

Tatkon, Carol C.

STREET ADDRESS

HOUSTON TX

13 STREET ADDRESS

800 Bell Street

CITY-STATE-ZIP

AS

14 CITY-STATE-ZIP

Houston, TX 77002

TITLE

AS

[] DELETE

21 TITLE

NAME

LYNCH, JOSEPH G

22 NAME

STREET ADDRESS

800 BELL ST

23 STREET ADDRESS

CITY-STATE-ZIP

HOUSTON TX

24 CITY-STATE-ZIP

TITLE

S

[] DELETE

31 TITLE

NAME

NOLAN, PETER A.

32 NAME

STREET ADDRESS

800 BELL STREET

33 STREET ADDRESS

CITY-STATE-ZIP

HOUSTON TX

34 CITY-STATE-ZIP

TITLE

VPTD

[] DELETE

41 TITLE

NAME

PENROSE, STEPHEN B. L.

42 NAME

STREET ADDRESS

800 BELL STREET

43 STREET ADDRESS

CITY-STATE-ZIP

HOUSTON TX

44 CITY-STATE-ZIP

TITLE

VP

[] DELETE

51 TITLE

NAME

HINSHAW, DAVID L.

52 NAME

STREET ADDRESS

800 BELL STREET

53 STREET ADDRESS

CITY-STATE-ZIP

HOUSTON TX

54 CITY-STATE-ZIP

TITLE

D

[] DELETE

61 TITLE

NAME

ALEXANDER, BOBBY W.

62 NAME

STREET ADDRESS

800 BELL STREET

63 STREET ADDRESS

CITY-STATE-ZIP

HOUSTON TX

64 CITY-STATE-ZIP

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:

Joseph G. Lynch

Signature and Typed or Printed Name of Signing Officer or Director
Joseph G. Lynch, Assistant Secretary

April 3, 1996 (713) 656-1807

Date (Day-Month-Year)

CR2E034 (12/95)