FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -8 PM 2:46

DOCUMENT # 845952 (1)

1. Corporation Name
SGB CONSTRUCTION SERVICES, INC.

Principal Place of Business	Mailing Address
14942 TALCOTT HOUSTON TX 77015	14942 TALCOTT HOUSTON TX 77015

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/08/1980
3a. Date of Last Report: 03/22/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 36-3068391 ☐ 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

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	1.1 TITLE	DC	☒ Change ☐ Addition
NAME	PEAT, IAN AV	1.2 NAME	Barrett, John	
STREET ADDRESS	23 WILLOW LN	1.3 STREET ADDRESS	23 Willow Ln.	
CITY-ST-ZIP	MITCHAM, SURREY	1.4 CITY-ST-ZIP	Mitcham, Surrey U.K.	
TITLE	DS	2.1 TITLE	Director	☐ Change ☒ Addition
NAME	BUTTERFIELD, PETER	2.2 NAME	Wigg, Chris	
STREET ADDRESS	14942 TALCOTT	2.3 STREET ADDRESS	23 Willow Ln.	
CITY-ST-ZIP	HOUSTON TX	2.4 CITY-ST-ZIP	Mitcham, Surrey U.K.	
TITLE	DP	3.1 TITLE	Director	☐ Change ☒ Addition
NAME	BUTTERFIELD, PETER	3.2 NAME	Mansell, Ken	
STREET ADDRESS	14942 TALCOTT	3.3 STREET ADDRESS	23 Willow Ln.	
CITY-ST-ZIP	HOUSTON TX	3.4 CITY-ST-ZIP	Mitcham, Surroy U.K.	
TITLE	S	4.1 TITLE		☐ Change ☐ Addition
NAME	GRIFFIN, WADE O	4.2 NAME		
STREET ADDRESS	14942 TALCOTT	4.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX	4.4 CITY-ST-ZIP		
TITLE	AS	5.1 TITLE		☐ Change ☐ Addition
NAME	NIXON, GEORGE	5.2 NAME		
STREET ADDRESS	14942 TALCOTT	5.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX	5.4 CITY-ST-ZIP		
TITLE	T	6.1 TITLE		☐ Change ☐ Addition
NAME	MCQUESTON, GEORGE	6.2 NAME		
STREET ADDRESS	14942 TALCOTT	6.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX	6.4 CITY-ST-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)(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: Wade O. Griffin 03/01/95 (713) 452-1600
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0480033 FP