FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90026 010 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 849114

1. Corporation Name					
WILLBROS ENERGY SERVICES COMPANY					
***************************************				E RABIAR IBRIL APARA 2010) MAGAL HARM ATAL AT	AN ANDEL BRANK ERBEN BREIT FIRM PRAT
Principal Place	of Business	Mailing Address		T IMBURA INNIY NIDYA INYA ISHALI INDIA ALAK AL	DIS DIDIL BEDEL DIDIL DIDEL DIDIL 1985
2431 E. 61ST STREET 2431 E. 61ST STREET					
SUITE 700 SUITE 700					
TULSA OK 74136-1267 TULSA OK 74136-1267			DO NOT WRITE IN T	HIS SPACE	
US		US		3. Date Incorporated or Qualifed	
				05/12/1981	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	·····	73-1074526	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22 SUITE		27 SUITE 600			Fee Required
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25	<u></u>		Personal Property Tax.	☐ Yes ☐ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
81 Nar					
CT CORPORATION SYSTEM			82 Street Address (P.O. Box Number is Not Acceptable)		
1200 S. PINE ISLAND ROAD					
PLAN	ITATION FL 33324		83		
			84 City		85 Zip Code
				-	FL
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-nam office or registered agent, or both, in the State of Florida. Such change was authorized by the companies.				rporation submits this statement for the purpos	e of changing its registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was aut	horized by the corpora la Statutes.	ition's board of directors. I hereby accept the a	ppointment as registered
	III lamiliai witii, alid accopt the obligatio	313 01, 0000011 007.0000, 110			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered Agent signature requ	rired when reinstating) DATI	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	X DELETE	1.1 TITLE	PD	🛣 Change 🔲 Addition
NAME	PHILLIPS, M.K.		1.2 NAME	HUBER, PAUL A.	
STREET ADDRESS	2431 E 61 ST #700		1.3 STREET ADDRESS	2431 E 61 ST #600	
CITY-ST-ZIP	TULSA, OK 00000		1.4 CITY-ST-ZIP	Tulsa, OK 74136	
TITLE	VD	☐ DELETE	2.1 TITLE	- Committee - Comm	★ Change
NAME	KAVANAUGH, DAVID L		2.2 NAME		ĺ
STREET ADDRESS	2431 E 61 ST #700		2.3 STREET ADDRESS	2431 E 61 ST #600	
TIN 01- 000 1110111 00000 71400		2. 4 CITY-ST-ZIP			
CITY-ST-ZIP	VD	DELETE	31 TITLE		Change ☐ Addition
	FOSTER, LANCE H	_	3.2 NAME		
NAME OTDEET ADDOESS			3.3 STREET ADDRESS	2431 E 61 ST #600	
STREET ADDRESS	2431 E 61 ST #700	ne	3.4 CITY-ST-ZIP	Z-JI D OI OI BOOO	
CITY-ST-ZIP	TULSA, OKLAHOMA 00000 7413	DELETE	4.1 TITLE		Change ☐ Addition
TITLE	S CONT TOUN N		4. 2 NAME		 ,
NAME	HOVE, JOHN N			2431 E 61 ST #600	
STREET ADDRESS	2431 E 61ST STREET, #200		4.3 STREET ADDRESS	2431 E 01 31 #000	
CITY-ST-ZIP	TULSA OK 74136	☐ DELETE	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ pereis	5.1 TITLE 5.2 NAME		
NAME					
STREET ADORESS	1		5.3 STREET ADDRESS		
CITY- \$T- ZIP		□ BELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
TITLE		☐ DELETE			☐ Change ☐ Addition
NAME			6.2 NAME		ļ
STREET ADDRESS			6 3 STREET ADDRESS		

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 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 emplowered 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 attackment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 26, 1999

(918) 748-7000 Daytime Phone #