

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2001 8:00 am
Secretary of State

04-18-2001 90041 027 ***150.00

DOCUMENT # **F00000002127** ✓

1. Entity Name

Neles Automation SCADA Solutions, Inc

Principal Place of Business

Mailing Address

7000 Hollister

Houston, TX 77040

Same

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

36-4334564

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

A0051323

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C.T. Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Director/Chairman** ☐ Delete
NAME **Arto Aaltonen**
STREET ADDRESS **Tulppatie 1B**
CITY-ST-ZIP **Fin-00881, Helsinki Finland**

TITLE **Treasurer** ☐ Change ☐ Addition
NAME **Toss Stubbs**
STREET ADDRESS **7000 Hollister**
CITY-ST-ZIP **Houston TX 77040**

TITLE **Director** ☐ Delete
NAME **Mauri Jaakonaho**
STREET ADDRESS **Tulppatie 1B**
CITY-ST-ZIP **Fin-00881, Helsinki Finland**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **Director/President** ☐ Delete
NAME **David Jardine**
STREET ADDRESS **10333 South Port Rd. S.W.**
CITY-ST-ZIP **Calgary Alberta T2W3X6**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **VP-Electric** ☐ Delete
NAME **Kelly Flock**
STREET ADDRESS **7000 Hollister**
CITY-ST-ZIP **Houston Texas 77040**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **VP-Business Controls** ☐ Delete
NAME **Steve Asan**
STREET ADDRESS **10333 S. Port Rd. S.W.**
CITY-ST-ZIP **Calgary Alberta T2W3X6**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **Secretary** ☐ Delete
NAME **Cameron Doncoe**
STREET ADDRESS **10333 S Port Rd. S.W.**
CITY-ST-ZIP **Calgary Alberta T2W3X6**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Toss Stubbs** **Toss Stubbs** **March 23, 01** **713 939 9399**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)