FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

2001 POST OAK BLVD., STE 600

HOUSTON TX 77056-6105

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

HOUSTON TX 77056

THILE NAME

STREET ADDRESS

2001 POST OAK BLVD.. STE 600



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400000400 (1)

WESTLAKE POLYMERS CORPORATION

3. Date Incorporated or Qualified 3a. Date of Last Report 01/26/1994 01/31/1996 2. Principa: Place of Business 2a. Mailing Address 4. FEI Number Applied For 76-0144230 Not Applicable 26 Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip. Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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 Signation, typed or printed name of region rold agent to at the diapplic acor. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ DELETE Change CD Addition 1.1 TITLE TITLE CHAO, T T NAME 1.2 NAME 2801 POST OAK BLVD., STE 600 1.3 STREET ADDRESS STREET ADORESS **HOUSTON TX** CITY-ST-2IP 1.4 CITY - ST - ZIP DELETE Change Addition 21 TITLE TITLE Vice Chairman CHAO, JAMES 2.2 NAME NAME Chao, James 2801 POST OAK BLVD., STE 600 2.3 STREET ADDRESS STREET ADDRESS 2801 Post Oak Blvd., Ste 600 **HOUSTON TX** 2. 4 CITY - ST - ZIP Houston, TX 77056 CITY - ST - ZIP Change Addition DELETE 3.1 TITLE 1:11.6 President /Secretary CHAO, ALBERT 3.2 NAME MAME Chao, Albert 2801 POST OAK BLVD., STE 600 STREET ADDRESS 3.3 STREET ADDRESS 2801 Post Oak Blvd., Ste 600 HOUSTON TX 3 4. CITY - ST - ZIP CITY-\$1-ZIF Assistant Secretary DELETE Change Addition 4.1 TITLE THLE Trenchard III, Louis B. ROBISON, MICHAEL A NAME 4. 2 NAME 2801 POST OAK BLVD., STE 600 2801 Post Oak Blvd., Ste 600 STREET ACCORESS 4.3 STREET ADDRESS HOUSTON TX Houston, TX 77056 CITY - ST - Z P 4.4 CITY - ST - ZIP DELF1E Change Addition 51 TITLE THE NAME 52 NAME **53 STREET ADDRESS** STREET ADDRESS 54 CHY-ST-ZIP CHY-St-7/2

FILED Jan 28 1997 8:00am Secretary of State



64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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 supplementar 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 trustoe 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.

61 TITLE

62 NAME 6.3 STREET ADDRESS

DELETE

Daytime Phone #

Date

Change

Addition

(96/6)