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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F94000001490 (1) DOCUMENT #

Feb 12 1998 8:00am Secretary of State

EOTT E	NERGY CORP.						
Principal Piace	of Business	Mailing Address				1 41611 MIBIO 18411 AA11 1861	
1330 POST OF	IK BLVD.	PO BOX 4666	PO BOX 4666				
SUITE 2700 HOUSTON TX 77210-4686					DO NOT WRITE IN THIS	PACE	
HOUSTON TX 77056 US					3. Date Incorporated or Qualified	FACE	
03					03/24/1994		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	r
21		26		47-0549256	Not Applica	able	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	ıl	
22		27		6. Certificate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		Z _(p) Country		Trust Fund Contribution Added to Fees			
	Zip Country Zip		30 Country		8. This corporation owes or has paid the current year Interpretarion of the Personal Property Tax due June 30.		
24	9. Name and Address of Curre	nt Registered Agent	[30]		10. Name and Address of New Registered		
CT CORPORATION SYSTEM 81							
1200 S. PINE ISLAND RD			82	Ctropt Adds	ess (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324			DZ.	Street Addin	ess (F.O. Dox Nomber is Not Acceptable)		
			83				
			84	City		85 Zip Code	
			- 1	,	FL		
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 typed or printed name of registered ac	pent and title if applicable (NO)	E Registered Apr	ent signature requir	red when reinstating) DATE		
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	DC	DELETE 1.11				Change Add	lition
NAME	GAYLORD, EDWARD O		1.2 NAME			ļ	
STREET ADDRESS 1330 POST OAK BLVD., SUITE		TE 2700	1.3 STREET	r addréss			
CITY-ST-ZIP	HOUSTON TX		1.4 CITY - S	ST-ZIP		Change Add	dition
TITLE	P					Cusulte Ci voo	HUIJK
NAME	AGG BOOT ONLY BUSE		22 NAME				
STREET ADDRESS	HOUSTON TX		4	T ADORESS			
CITY-ST-ZIP	W TOOSTON IX	DELETE	2.4 CITY - 3.1 TITLE	ST-ZIP		Change Add	dition
TITLE	THE CAPTURE		3.1 HILE 3.2 NAME				
NAME STREET ADORESS				T ADDRESS		ļ	
CITY-ST-ZIP	HOUSTON TX	ALLATAN TV		ST-ZIP			
TITLE	VCFO	DELETE	4.1 TITLE	V. 5"		☐ Change ☐ Add	dition
NAME	APPELT, STEVEN A		4. 2 NAME				
STREET ADDRESS	1330 POST OAK BLVD		4.3 STREET	T ADDRESS		ļ	
CITY-ST-ZIP	HOUSTON TX		4.4 CITY-	ST-ZIP			
TITLE	V	DELETE	5.1 TITLE			☐ Change ☐ Add	dition
NAME	COSTANTINO, THOMAS V		5.2 NAME			'	
STREET ADDRESS	1330 POST OAK BLVD		5.3 STREE	T ADDRESS			
CITY-ST-ZIP	HOUSTON TX		5.4 CITY-	ST-ZIP			اهاد
TITLE	VS	DETELE	6.1 TITLE			Change Add	JIIION
NAME	MENCHACA, PEGGY B		6.2 NAME			ļ	
STREET ADORESS	1330 POST OAK BLVD			T ADDRESS			
CITY-ST-ZIP	HOUSTON TX	milet. Helio Efficio plano mat min-106 : 4	6.4 CITY-	ST-ZIP	Section 110 07/3VI) Florida Statutas I further o	ertify that the Informs	tion
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 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.							