

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000004456 (8)

1. Corporation Name

INTERNATIONAL TURBINE SERVICE, INC.

Principal Place of Business

1060 E. NORTHWEST HWY.
GRAPEVINE TX 76051

Mailing Address

1060 E. NORTHWEST HWY.
GRAPEVINE TX 76051



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 607.06(2) and 607.15(3), Florida Statutes, the above named corporation's officers, the undersigned, hereby certify 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.06(2), Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS

TITLE

PDC

[] DELETE

NAME

KINCAID, THOMAS R

STREET ADDRESS

1060 E. NORTHWEST HWY.
GRAPEVINE TX 76051

CITY-STATE-ZIP

V

[] DELETE

NAME

KOMNENOVICH, DAN

STREET ADDRESS

7511 LEMMON AVE.
DALLAS TX 75209

CITY-STATE-ZIP

S

[] DELETE

NAME

EDGINGTON, LYNN E

STREET ADDRESS

975 WILDWOOD
SOUTHLAKE TX 76092

CITY-STATE-ZIP

D

[] DELETE

NAME

JONES, RICHARD

STREET ADDRESS

8117 PRESTON RD., #440 LB 16
DALLAS TX 75225

CITY-STATE-ZIP

D

[] DELETE

NAME

BOYLE, GUY

STREET ADDRESS

1060 E. NORTHWEST HWY.
GRAPEVINE TX 76051

CITY-STATE-ZIP

[] DELETE

NAME

STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplement if 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 or is changed or corrected in accordance with the instructions.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)