

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

FILED

Feb 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F96000002173 (0)

1. Corporation Name
CORE LABORATORIES, INC.

Principal Place of Business

5295 HOLLISTER ROAD
HOUSTON TX 77040

Mailing Address

5295 HOLLISTER ROAD
HOUSTON TX 77040-6205



3. Date Incorporated or Qualified

05/01/1996

3a. Date of Last Report

4. FEI Number

76-0446294

Applied For

Not Applicable

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 607.0502 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 of person in title of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
P	DEMSHUR, DAVID M	5295 HOLLISTER ROAD	HOUSTON TX 77040	<input type="checkbox"/>
V	PERNA, JOSEPH R	5295 HOLLISTER ROAD	HOUSTON TX 77040	<input type="checkbox"/>
S	DENSON, JOHN D	5295 HOLLISTER ROAD	HOUSTON TX 77040	<input type="checkbox"/>
T	BERGMARK, RICHARD	5295 HOLLISTER ROAD	HOUSTON TX 77040	<input type="checkbox"/>
D	WEINROTH, STEPHEN D	152 W 57TH	NEW YORK NY 10019-3301	<input type="checkbox"/>
D	READ, JAMES A	MANFIELD HOUSE, 376-379 STRAND, LONDON	WC2R 0LR UNITED KINGDOM	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE	Change	Addition
11	12	13	14	21	22	23
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	32	33	34	35	36
37	38	39	40	41	42	43
44	45	46	47	48	49	50
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58	59	60	61	62	63	64
65	66	67	68	69	70	71
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79	80	81	82	83	84	85
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107	108	109	110	111	112	113
114	115	116	117	118	119	120
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135	136	137	138	139	140	141
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464	465	466	467	468	469	470
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492	493	494	495	496	497	498
499	500	501	502	503	504	505
506	507	508	509	510	511	512
513	514	515	516	517	518	519
520	521	522	523	524	525	526
527	528	529	530	531	532	533
534	535	536	537	538	539	540
541	542	543	544	545	546	547
548	549	550	551	552	553	554
555	556	557	558	559	560	561
562	563	564	565	566	567	568
569	570	571	572	573	574	575
576	577	578	579	580	581	582
583	584	585	586	587	588	589
590	591	592	593	594	595	596
597	598	599	600	601	602	603
604	605	606	607	608	609	610
611	612	613	614	615	616	617
618	619	620	621	622	623	624
625	626	627	628	629	630	631
632	633	634	635	636	637	638
639	640	641	642	643	644	645
646	647	648	649	650	651	652
653	654	655	656	657	658	659
660	661	662	663	664	665	666
667	668	669	670	671	672	673
674	675	676	677	678	679	680
681	682	683	684	685	686	687
688	689	690	691	692	693	694
695	696	697	698	699	700	701
702	703	704	705	706	707	708
709	710	711	712	713	714	715
716	717	718	719	720	721	722
723	724	725	726	727	728	729
730	731	732	733	734	735	736
737	738	739	740	741	742	743
744	745	746	747	748	749	750
751	752	753	754	755	756	757
758	759	760	761	762	763	764
765	766	767	768	769	770	771
772	773	774	775	776	777	778
779	780	781	782	783	784	785
786	787	788	789	790	791	792
793	794	795	796	797	798	799
800	801	802	803	804	805	806
807	808	809	810	811	812	813
814	815	816	817	818	819	820
821	822	823	824	825	826	827
828	829	830	831	832	833	834
835	836	837	838	839	840	841
842	843	844	845	846	847	848
849	850	851	852	853	854	855
856	857	858	859	860	861	862
863	864	865	866	867	868	869
870	871	872	873	874	875	876
877	878	879	880	881	882	883
884	885	886	887	888	889	890
891	892	893	894	895	896	897
898	899	900	901	902	903	904
905	906	907	908	909	910	911
912	913	914	915	916	917	918
919	920	921	922	923	924	925
926	927	928	929	930	931	932
933	934	935	936	937	938	939
940	941	942	943	944	945	946
947	948	949	950	951	952	953
954	955	956	957	958	959	960
961	962	963	964	965	966	967
968	969	970	971	972	973	974
975	976	977	978	979	980	981
982	983	984	985	986	987	988
989	990	991	992	993	994	995
996	997	998	999	1000	1001	1002

14. I do 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.

SIGNATURE: *[Signature]* Treasurer 2/8/97 713-460-9600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Day:mo:yr: Phone #

CR2E034 (9/96)