

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

FILED  
May 28 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000005855

1. Corporation Name

NORAM ENERGY SERVICES, INC.

Principal Place of Business

1111 LOUISIANA

HOUSTON, TX 77002

Mailing Address

P.O. BOX 4567

HOUSTON, TX 77210

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25 US

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30 US

3. Date Incorporated or Qualified

11/06/96

4. FEI Number

72-1183055

Applied For

Not Applicable

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	DON D. JORDAN	
STREET ADDRESS	1111 LOUISIANA	
CITY - ST - ZIP	HOUSTON, TX 77002	

TITLE	DP	<input type="checkbox"/> DELETE
NAME	TAMELA PALLAS	
STREET ADDRESS	1111 LOUISIANA	
CITY - ST - ZIP	HOUSTON, TX 77002	

TITLE	V	<input type="checkbox"/> DELETE
NAME	BRIAN REDD	
STREET ADDRESS	1111 LOUISIANA	
CITY - ST - ZIP	HOUSTON, TX 77002	

TITLE	T	<input type="checkbox"/> DELETE
NAME	MARC KILBRIDE	
STREET ADDRESS	1111 LOUISIANA	
CITY - ST - ZIP	HOUSTON, TX 77002	

TITLE	AS	<input type="checkbox"/> DELETE
NAME	RICHARD B. DAUPHIN	
STREET ADDRESS	1111 LOUISIANA	
CITY - ST - ZIP	HOUSTON, TX 77002	

TITLE	AT	<input type="checkbox"/> DELETE
NAME	LINDA K. GEIGER	
STREET ADDRESS	1111 LOUISIANA	
CITY - ST - ZIP	HOUSTON, TX 77002	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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.

SIGNATURE:

*Linda Geiger*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/98

Date

713-207-3000

Daytime Phone #

CR2E034 (10/97)