

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

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90062 035 ***150.00

PROFIT CORPORATION ANNUAL REPORT	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 698A00012722

1. Corporation Name **F98000001317**

ENRON ENERGY SERVICES, INC. ✓

Principal Place of Business 1400 SMITH STREET HOUSTON, TX 77002	Mailing Address P.O. BOX 1188 EB-4651 HOUSTON, TX 77251-1188
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 03/09/1998	
4. FEI Number 76-0551325		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. 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 85 Zip Code	
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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				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	C/P/D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	PAI, LOU L.		1.2 NAME				
STREET ADDRESS	1400 SMITH STREET		1.3 STREET ADDRESS				
CITY - ST - ZIP	HOUSTON, TX 77002		1.4 CITY - ST - ZIP				
TITLE	V/T	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	McMAHON, JEFFREY		2.2 NAME				
STREET ADDRESS	1400 SMITH STREET		2.3 STREET ADDRESS				
CITY - ST - ZIP	HOUSTON, TX 77002		2.4 CITY - ST - ZIP				
TITLE	V/S	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	MENCHACA, PEGGY B.		3.2 NAME				
STREET ADDRESS	1400 SMITH STREET		3.3 STREET ADDRESS				
CITY - ST - ZIP	HOUSTON, TX 77002		3.4 CITY - ST - ZIP				
TITLE	V	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	GULYASSY, WILLIAM J.		4.2 NAME				
STREET ADDRESS	1400 SMITH STREET		4.3 STREET ADDRESS				
CITY - ST - ZIP	HOUSTON, TX 77002		4.4 CITY - ST - ZIP				
TITLE	D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	SHARP, VICTORIA T.		5.2 NAME				
STREET ADDRESS	1400 SMITH STREET		5.3 STREET ADDRESS				
CITY - ST - ZIP	HOUSTON, TX 77002		5.4 CITY - ST - ZIP				
TITLE	V/D	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	WHITE, THOMAS E.		6.2 NAME				
STREET ADDRESS	1400 SMITH STREET		6.3 STREET ADDRESS				
CITY - ST - ZIP	HOUSTON, TX 77002		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, with all other like empowered.

SIGNATURE: 

JAMES W. HARRIS, V

4/26/2000 713-853-5172

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #