

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2004 8:00 am
Secretary of State

01-27-2004 90011 001 ***900.00

DOCUMENT # F98000005442

1. Entity Name

FLUOR NUCLEAR SERVICES, INC.



Principal Place of Business

ONE ENTERPRISE DR
F2B
ALISO VIEJO, CA 92656

Mailing Address

ONE ENTERPRISE DR
F2B
ALISO VIEJO, CA 92656

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01072004

Chg-P

CR2E034 (10/03)

4. FEI Number

33-0690996

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME STEVENS, M.A.,
STREET ADDRESS ONE ENTERPRISE DR
CITY-ST-ZIP ALISO VIEJO, CA 92656

TITLE VT ☐ Delete
NAME HULL, S F
STREET ADDRESS ONE ENTERPRISE DR
CITY-ST-ZIP ALISO VIEJO, CA 92656

TITLE SD ☐ Delete
NAME FISHER, L N
STREET ADDRESS ONE ENTERPRISE DR
CITY-ST-ZIP ALISO VIEJO, CA 92656

TITLE CFO ☐ Delete
NAME STEWERT, D.M.
STREET ADDRESS ONE ENTERPRISE DR
CITY-ST-ZIP ALISO VIEJO, CA 92656

TITLE AS ☐ Delete
NAME REYNOLDS, J R
STREET ADDRESS 100 FLUOR DANIEL DR
CITY-ST-ZIP GREENVILLE, SC 29607

TITLE AT ☐ Delete
NAME TSENG, MIN C
STREET ADDRESS ONE ENTERPRISE DR F2B
CITY-ST-ZIP ALISO VIEJO, CA 92656

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☒ Change ☐ Addition
NAME CONSTABLE, D.E.
STREET ADDRESS ONE ENTERPRISE DR.
CITY-ST-ZIP ALISO VIEJO, CA 92656

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MIN C. TSENG, ASSISTANT TREASURER 1/23/04

Date

449-349-3681

Daytime Phone #