

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000954

1. Entity Name

OILFIELD MATERIALS CONSULTANTS, INC.

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90113 037 ***150.00

Principal Place of Business Mailing Address
3838 NORTH SAM HOUSTON PKWY 3838 NORTH SAM HOUSTON PKWY
STE 280 STE 280
HOUSTON TX 77032 HOUSTON TX 77032-3412

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

38-3435999

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CD ☐ Delete
NAME JOHNSON, WILLIAM L
STREET ADDRESS 405 WATER STREET
CITY-ST-ZIP PORT HURON MI

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

TITLE VTD ☒ Delete
NAME ANGEMEIER, KURT A
STREET ADDRESS 405 WATER STREET
CITY-ST-ZIP PORT HURON MI

TITLE VP ☒ Change ☐ Addition
NAME Stone, Robert A
STREET ADDRESS 405 Water Street
CITY-ST-ZIP Port Huron MI

TITLE V ☒ Delete
NAME SCHNEIDER, JOHN E
STREET ADDRESS 405 WATER STREET
CITY-ST-ZIP PORT HURON MI

TITLE VP ☒ Change ☐ Addition
NAME Warsinske, Steven W
STREET ADDRESS 405 Water Street
CITY-ST-ZIP Port Huron MI

TITLE P ☐ Delete
NAME FOSTER, JIMMY C
STREET ADDRESS 3838 NORTH SAM HOUSTON PKWY STE 280
CITY-ST-ZIP HOUSTON TX

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

TITLE V ☐ Delete
NAME HINES, RICKIE J
STREET ADDRESS 3838 NORTH SAM HOUSTON PKWY STE 280
CITY-ST-ZIP HOUSTON TX

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

TITLE V ☐ Delete
NAME YOUNG, DEBORAH L
STREET ADDRESS 3838 NORTH SAM HOUSTON PKWY STE 280
CITY-ST-ZIP HOUSTON TX

TITLE V ☒ Change ☐ Addition
NAME Foster, Deborah L
STREET ADDRESS 3838 North Sam Houston Prkwy E #2
CITY-ST-ZIP Houston TX

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jimmy C Foster
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jimmy C Foster 01-27-00 (281) 449-3891

Date

Daytime Phone #