2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 24, 2000 8:00 am Secretary of State **DOCUMENT # P01735** WESTERN ATLAS INC. 01-24-2000 90005 050 ***150.00 Mailing Address Principal Place of Business 3900 ESSEX LANE 3900 ESSEX LANE STE 1200 STF 1200 705401 HOUSTON TX 77027 HOUSTON TX 77027-5170 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 95-3899675 Not Applicable Zip Country Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on báck) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FOR TUPE A SA OFFICERS AND DIRECTORS 12. 11. "明年也不要此外,有的是"特人",并且不得的 TITLE TITLE ☐ Delete Additions on Additional page NAME BATES, THOMAS STREET ADDRESS STREET ADDRESS 3900 ESSEX LANE STE 1200 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77027 VP.D Change Addition TITLE ☐ Delete TITLE NAME FINLEY, STEVE NAME STREET ADDRESS STREET ADDRESS 3900 ESSEX LANE STE 1200 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77027 ☐ Change ☐ Delete TITLE Addition TITLE NAME GILBERT, GERRY NAME STREET ADDRESS STREET ADDRESS 3900 ESSEX LANE STE 1200 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77027 Delete ☐ Change Addition TITLE NAME NAME HARRIS, JAMES STREET ADDRESS STREET ADDRESS 3900 ESSEX LANE STE 1200 CITY-ST-ZIP CITY-ST-ZIP <u>Houston TX 77027</u> VP. ☐ Delete Change ☐ Addition TITLE TITLE NAME JONES, GARY STREET ADDRESS STREET ADDRESS 3900 ESSEX LANE STE 1200 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77027 Change ☐ Addition **VCFO** TITLE TITLE Delete NAME NAME MATTSON, ERIC

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

3900 ESSEX LANE STE 1200

HOUSTON TX 77027

STREET ADDRESS

CITY-ST-ZIP

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