2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #   **P01735**

1. Entity Name
WESTERN ATLAS INC.

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90007 020 ***550.00

Principal Place of Business	Mailing Address
3900 ESSEX LANE STE 1200 HOUSTON TX 77027 US	3900 ESSEX LANE STE 1200 HOUSTON TX 77027 US

2. Principal Place of Business

3. Mailing Address

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State	**4.** FEI Number **95-3899675**	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 $550.00** After September 12, 2001 Fee will be $750.00 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 NAME STREET ADDRESS CITY-ST-ZIP	P BATES, THOMAS 3900 ESSEX LANE STE 1200 HOUSTON TX 77027	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ANDREW J. SZESCILA 3900 ESSEX LANE, Suite 1200 Houston, Tx 77027	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FINLEY, STEVE 3900 ESSEX LANE STE 1200 HOUSTON TX 77027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GILBERT, GERRY 3900 ESSEX LANE STE 1200 HOUSTON TX 77027	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHN H. LOHMANN, JR. 3900 ESSEX LANE, Suite 1200 Houston, TX 77027	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, LINDA 3900 ESSEX LANE STE 1200 HOUSTON TX 77027	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S, VP DANIEL J. CHURAY 3900 ESSEX LANE, Suite 1200 Houston, TX 77027	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JONES, GARY 3900 ESSEX LANE STE 1200 HOUSTON TX 77027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DOTY, DOUG 3900 ESSEX LANE STE 1200 HOUSTON TX 77027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (5/01)

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: ____SIGNATURE REQUIRED____   7-12-01   (713)439-8600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #