SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 21 PM 12: 47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P04771** **(2)**

1. Corporation Name
HORIZONTAL DRILLING INTERNATIONAL, INC.

Principal Place of Business
3430 ROGERDALE
P. O. BOX 42283
HOUSTON TX 77042
US

Mailing Address
3430 ROGERDALE
P.O.BOX 42283
HOUSTON TX 77042

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/25/1985
3a. Date of Last Report: 06/14/1994
4. FEI Number: 76-0107927 — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLADN ROAD
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 FL 85 Zip Code

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 ______ DATE ______

CR2E034 (3/95)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1 1 TITLE	☐ Change ☐ Addition
NAME	BENDER, THOMAS	1 2 NAME	
STREET ADDRESS	1612 E. LAUREL OAKS	1 3 STREET ADDRESS	
CITY ST ZIP	RICHMOND TX	1 4 CITY ST ZIP	
TITLE	CD	2 1 TITLE	☐ Change ☐ Addition
NAME	SALAH, AHMED BEN	2 2 NAME	
STREET ADDRESS	10823 CANDLEWOOD	2 3 STREET ADDRESS	
CITY ST ZIP	HOUSTON TX	2 4 CITY ST ZIP	
TITLE	V	3 1 TITLE	☐ Change ☐ Addition
NAME	MEADERS, JOHN S.	3 2 NAME	
STREET ADDRESS	10027 SPICE LANE, SUITE 802	3 3 STREET ADDRESS	
CITY ST ZIP	HOUSTON TX	3 4 CITY ST ZIP	
TITLE	PD	4 1 TITLE	☐ Change ☐ Addition
NAME	SHELL, GARY	4 2 NAME	
STREET ADDRESS	3302 THRYSEN CIRCLE	4 3 STREET ADDRESS	
CITY ST ZIP	HOUSTON TX	4 4 CITY ST ZIP	
TITLE	VD	5 1 TITLE	☐ Change ☐ Addition
NAME	WILSON, THOMAS	5 2 NAME	
STREET ADDRESS	1614 RIVERBEND CROSSING	5 3 STREET ADDRESS	
CITY ST ZIP	HOUSTON TX	5 4 CITY ST ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY ST ZIP		6 4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: ______ 6/20/95 713-785-3369
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0176047 FP