FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 26, 2001 8:00 am **DOCUMENT # P14861 Secretary of State BAKER HUGHES INCORPORATED** 03-26-2001 90170 044 ***150.00 Principal Place of Business Mailing Address 3900 ESSEX LANE 3900 ESSEX LANE SUITE 1200 **SUITE 1200** HOUSTON TX 77027 HOUSTON TX 77027 818207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 76-0207995 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) TITLE ☐ Delete TITLE ☐ Change ☐ Addition DOTY, DOUGLAS C. NAME NAME 3900 ESSEX LANE, S-1200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77027** CITY-ST-ZIP PDC TITLE Delete TITLE YRESIDENT Change WICHASE WILEY LUKINS, MAX L. NAME NAME 3900 ESSEXUALE, SUITE 1200 3900 ESSEX LANE, S-1200 STREET ADDRESS STREET ADDRESS **HOUSTON TX 77027** CITY-ST-7IP CITY-ST-ZIP HOUS ROW, TX TITLE Delete TITLE Addition O'DONELL-III LAWRENCE NAME NAME 3900 ESSEX LANE, S-1200 SUITA DOL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77027** CITY-ST-ZIP TITLE 🚂 Delete TITLE ☐ Change **►** Addition ALEGE SMITH, LINDA J NAME NAME 3900 ESSER LAND, SUITE HOD 3900 ESSEX LANE, S-1200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77027** CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition FINLEY, G.S. S NAME STREET ADDRESS 3900 ESSEX LANE, S-1200 STREET ADDRESS CITY-ST-ZIF **HOUSTON TX 77027** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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: JULE

CHATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3/14/01

713 459.8600

Daytime Phone #