2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)** P14861 DOCUMENT # 1. Entity Name BAKER HUGHES INCORPORATED THE TERMOTOR OF THE STATES

FILED Jan 27, 2003 8:00 am Secretary of State 01-27-2003 90377 033 ***150.00

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	ce of Business 13 CH		g Address								
3900 ESSEX !	LANE	3900 1213 SULLE	ESSEX LANE								
SUITE 1200											
HOUSTON TX	. 77027	HOUS	TON TX 77027							4 (
Principal Place of Business 3. Mailing Address											
Z. Trinopartides of Business			o. Walling Addiess								
Suite, Apt. #, etc. Suite			ite, Apt. #, etc.			CHECK HERE IS MAKING OUTSTOOD					
							☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State			4. FEI Number 76-0207995			Ar	oplied For	
								<u>, </u>	No	ot Applicable	
Zip \	Country			Country	try 5. (Status Desired		\$8.75 Add		
6. Name and Address of Current Registered Agent				 	<u>.</u>	7 Alama and A.	ddaaa af Naw		Fee Require	ď	
	6. Name and Address of Current	negisien	ed Agent	Name	7. Name and Address of New Registered Agent Name						
CT CORPORATION SYSTEM											
1200 S. PINE ISLAND ROAD			Street Address			s (P.O. Box Number is Not Acceptable)					
PLANTATION FL 33324											
FLANTATION FL 33324											
				City	City			FL	Zip Cod	е	
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. I am familiar with, and accept											
	tions of registered agent.				/-g//	agom, or acm,					
SIGNATURE .	Signature, typed or printed name of registered agent	and title if app	licable. (NOTE:	Registered Agent sign	ature required wh	en reinstating)		DATE			
	THE NOWILL EEE IC 6450.00										
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00							ion Campaign F			O May Be	
Make Check Payable to Florida Department of State						Trust	Fund Contribution	on. L	J Added	to Fees	
10.	OFFICERS AND	DIRECTO	<u> </u> BS	11,		ADDITIONS/CH	HANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
TITLE	TVP	01.12070	☐ Delete	THILE	T	71001710110101	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change	Addition	
NAME	DOTY, DOUGLAS C.		_ Ocicie	NAME							
STREET ADDRESS	3900 ESSEX LANE, S-1200			STREET ADDRESS							
CITY-ST-ZIP	HOUSTON TX 77027			CITY-ST-ZIP						}	
TITLE	P		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	WILEY, MICHAEL			NAME							
STREET ADDRESS	3900 ESSEX LANE STE 1200			STREET ADDRESS						ĺ	
CITY-ST-ZIP	HOUSTON TX 77027			CITY-ST-ZIP							
TITLE	V		Delete _	TITLE					☐ Change	☐ Addition	
NAME	LOHMAN, JOHN H JR			NAME							
STREET ADDRESS CITY-ST-ZIP	3900 ESSEX LANE STE 1200			STREET ADDRESS CITY-ST-ZIP							
	HOUSTON TX 77027	···· · · · · · · · · · · · · · · · · ·									
TITLE	ALEODO CANDOS		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS	ALFORD, SANDRA 3900 ESSEX LANE STE 1200			NAME STREET ADDRESS		•					
CITY-ST-ZIP	HOUSTON TX 77027			CITY-ST-ZIP	1						
TITLE	V		☐ Delete	TITLE	1				☐ Change	☐ Addition	
NAME	FINLEY, G.S. S		□ Delete	NAME					☐ Change	☐ Multiful }	
STREET ADDRESS	3900 ESSEX LANE, S-1200			STREET ADDRESS							
CITY-ST-ZIP	HOUSTON TX 77027			CITY-ST-ZIP	1						
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NAME			23,00	NAME						_	
STREET ADDRESS				STREET ADDRESS							
CITY-ST-ZIP				CITY-ST-ZIP							
12. I hereby o	certify that the information supplied with	this filing	does not qualify for	the exemption st	ated in Section	on 119.07(3)(i), l	Florida Statutes.	I further cert	ify that the in	formation	

indicated on this report or supplemental report of the corporation or the receiver or trustee em changed, or on an attachment with an address 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 towered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if , with all other like empowered.

SIGNATURE: