

09/12/97 15:45 FAX 918 581 6645
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

JOHNSON ALLEN

002/003

FILED

Sep 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P 17738			
1. Corporation Name LAUFEN INTERNATIONAL INC.,			
Principal Place of Business		Mailing Address	
4942 E. 66th St. N. Tulsa, Ok 74117			
2. Principal Place of Business		3. Date Incorporated or Qualified	
4942 E. 66th St. N. Suite, Apt. #, etc.		6-11-81	
2a. Mailing Address		3a. Date of Last Report	
P.O. BOX 6600 Suite, Apt. #, etc.		3/96	
2b. City & State		4. PER Number	
Tulsa, Ok		73-1139950	
2c. Zip		Applied For	
74117		☐ Not Applicable	
2d. Country		5. Certificate of Status Desired	
US		☒ \$8.75 Additional Fee Required	
2e. City & State		6. Election Campaign Financing	
Tulsa, Ok		☐ \$5.00 May Be Added to Fees	
2f. Zip		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
74156		☐ Yes ☒ No	
2g. Country		8. Name and Address of Current Registered Agent	
US			
2h. City & State		9. Name and Address of New Registered Agent	
Tulsa, Ok			
2i. Zip		81. Name	
74117		The Prentice-Hall Corp. Sys.	
2j. Country		82. Street Address (P.O. Box Numbers Not Acceptable)	
US		1201 Hays St. Suite 105	
2k. City & State		83. City	
Tulsa, Ok		Tallahassee	
2l. Zip		84. Zip Code	
74117		FL 32301	
11. Pursuant to the provisions of Sections 607.0602 and 607.1808, 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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent Signature required when reappointing) DATE _____			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE		☐ Change ☐ Addition	
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE		☐ Change ☐ Addition	
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		☐ Change ☐ Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		☐ Change ☐ Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		☐ Change ☐ Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Beth B Hood Beth B Hood 9/12/97 428-3851x286			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			