FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

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Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # P18465 (5)

1. Corporation Name
OCCIDENTAL CRUDE SALES, INC.

Principal Place of Business	Mailing Address
2000 POST OAK BLVD. HOUSTON TX 77506-4409 US	P. O. BOX 300 TULSA OK 74102 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/17/1988

4. FEI Number: 94-3051926 — 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 — Country 25	Zip 29 — Country 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYS STREET
STE - 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 CERTIFIED MAIL # 038837
84 City — 85 Zip Code

DATE MAILED APR 0 9 1998

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 ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change / Addition
TITLE	AS	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PARISE, STEPHEN P.		1.2 NAME		
STREET ADDRESS	10889 WILSHIRE BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	LOS ANGELES CA		1.4 CITY-ST-ZIP		
TITLE	AT	☒ DELETE	2.1 TITLE	VP/T	☐ Change ☒ Addition
NAME	GREEN, SHELLEY D		2.2 NAME	DAVID C. YEN	
STREET ADDRESS	10889 WILSHIRE BLVD.		2.3 STREET ADDRESS	10889 WILSHIRE BLVD	
CITY-ST-ZIP	LOS ANGELES CA		2.4 CITY-ST-ZIP	LOS ANGELES, CA 90024	
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MILLER, MICHAEL P		3.2 NAME		
STREET ADDRESS	1200 DISCOVERY DR		3.3 STREET ADDRESS		
CITY-ST-ZIP	BAKERSFIELD CA		3.4 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	PETERSON, LINDA A		4.2 NAME		
STREET ADDRESS	10889 WILSHIRE BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	LOS ANGELES CA		4.4 CITY-ST-ZIP		
TITLE	AS	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ROSS, DAVID G		5.2 NAME		
STREET ADDRESS	110 WEST 7TH STREET		5.3 STREET ADDRESS		
CITY-ST-ZIP	TULSA OK		5.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	NIEHAUS, JAMES R		6.2 NAME	S. A. (PETE) SMITH	
STREET ADDRESS	1200 DISCOVERY DR		6.3 STREET ADDRESS	1200 DISCOVERY DR.	
CITY-ST-ZIP	BAKERSFIELD CA		6.4 CITY-ST-ZIP	BAKERSFIELD, CA 93309	

CR2E034 (10/97)

14. 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 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: DAVID G. ROSS 4-7-98 (918) 561-3497