

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

FILED
Jun 02 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **P22256** (2)
1. Corporation Name
STRATUS PETROLEUM CORP.



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|---|---|
| Principal Place of Business 9040 ROSWELL RD STE 640 ATLANTA GA 30350 US | Mailing Address 9040 ROSWELL RD STE 640 ATLANTA GA 30350 US |
|---|---|

DO NOT WRITE IN THIS SPACE

| | | |
|--|---|---|
| 2. Principal Place of Business 21 9040 Roswell Road Suite, Apt. #, etc. 22 Suite 380 City & State 23 Atlanta, GA Zip 24 30350 | 2a. Mailing Address 26 9040 Roswell Road Suite, Apt. #, etc. 27 Suite 380 City & State 28 Atlanta, GA Zip 29 30305 | Country 25 Fulton 30 Fulton |
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|---|---------------------------------------|--|
| 3. Date Incorporated or Qualified 12/22/1988 | 4. FEI Number 58-1818907 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required | |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees | |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |

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| 9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST 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 84 City 85 Zip Code FL |
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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 of person appointed to act as registered agent and file this application

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--------------------|---|------------------------------|
| TITLE | PTD | 1.1 TITLE | PTD |
| NAME | SHIAH, THOMAS R. | 1.2 NAME | Shiah, Thomas R. |
| STREET ADDRESS | 600 THIRD AVE. | 1.3 STREET ADDRESS | 885 Third Avenue, 33rd Fl |
| CITY-ST-ZIP | NEW YORK NY | 1.4 CITY-ST-ZIP | New York, NY 10022 |
| TITLE | VS | 2.1 TITLE | VS |
| NAME | FRANK, GILBERT M. | 2.2 NAME | Frank, Gilbert M. |
| STREET ADDRESS | 115 NOBILITY COURT | 2.3 STREET ADDRESS | 9040 Roswell Road, Suite 380 |
| CITY-ST-ZIP | ROSWELL GA | 2.4 CITY-ST-ZIP | Atlanta, GA 30350 |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

| | | |
|--------------------|------------------------------|--|
| 1.1 TITLE | PTD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | Shiah, Thomas R. | |
| 1.3 STREET ADDRESS | 885 Third Avenue, 33rd Fl | |
| 1.4 CITY-ST-ZIP | New York, NY 10022 | |
| 2.1 TITLE | VS | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | Frank, Gilbert M. | |
| 2.3 STREET ADDRESS | 9040 Roswell Road, Suite 380 | |
| 2.4 CITY-ST-ZIP | Atlanta, GA 30350 | |
| 3.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY-ST-ZIP | | |
| 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 6.4 CITY-ST-ZIP | | |

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 in an addition with an address.

SIGNATURE

CR2E034 (10/97)