

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90182 046 ***150.00

DOCUMENT # P24695

1. Corporation Name

FOSTER WHEELER PYROPOWER, INC.

Principal Place of Business

8925 REHCO RD.
SAN DIEGO CA 92121-3269

Mailing Address

PERRYVILLE CORP PARK
%TAX DEPT
CLINTON NJ 08809
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/06/1989

4. FEI Number
95-3565932

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 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

FL

85 Zip Code

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

TITLE PCEO ☐ DELETE

NAME TAIBI, F
STREET ADDRESS 8925 REHCO RD.
CITY-ST-ZIP SAN DIEGO CA

TITLE T ☐ DELETE

NAME KOHONEN, KARI
STREET ADDRESS PERRYVILLE CORP PARK
CITY-ST-ZIP CLINTON NJ

TITLE S ☐ DELETE

NAME FRIES-GARDNER, LISA MARIE
STREET ADDRESS PERRYVILLE CORP PARK
CITY-ST-ZIP CLINTON NJ

TITLE AT ☒ DELETE

NAME SCERBO, A
STREET ADDRESS 8925 REHCO RD
CITY-ST-ZIP SAN DIEGO CA

TITLE AS ☐ DELETE

NAME DOYLE, JOHN A JR
STREET ADDRESS PERRYVILLE CORP PARK
CITY-ST-ZIP CLINTON NJ

TITLE VP ☐ DELETE

NAME ENGSTROM, FOLKE
STREET ADDRESS 12 PEACH TREE HILL RD
CITY-ST-ZIP LIVINGSTON NJ

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

6.1 TITLE ☐ Change ☐ 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Kari Kohonen* / Treasurer 4/9/99 (908) 713-3005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)