SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $875.)

FILED
May 14 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 #** P28682 (3)

1. Corporation Name
ENGAS, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 1400 SMITH STREET | PO BOX 1188 |
| HOUSTON, TX 77002 | HOUSTON, TX 77251 |
| US | US |

3. Date Incorporated or Qualified: 03/21/1990
3a. Date of Last Report: 05/01/1996

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 1400 SMITH STREET | 26 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 HOUSTON, TX | City & State 28 |
| ZIP 24 77002 / Country 25 USA | ZIP 29 / Country 30 |

4. FEI Number: 76-0297430 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

**9. Name and Address of Current Registered Agent**
C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD
PLANTATION, FL 32334

**10. Name and Address of New Registered Agent**
31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 ZIP

[redacted] 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 | PM | ☐ DELETE |
| NAME | JOHN J. ESSLINGER | |
| STREET ADDRESS | 1400 SMITH STREET | |
| CITY-ST-ZIP | HOUSTON, TX. 77002 | |
| TITLE | VP | ☐ DELETE |
| NAME | ROBERT J. HERMANN | |
| STREET ADDRESS | 1400 SMITH STREET | |
| CITY-ST-ZIP | HOUSTON, TX. 77002 | |
| TITLE | VP | ☐ DELETE |
| NAME | REBECCA C. CARTER | |
| STREET ADDRESS | 1400 SMITH STREET | |
| CITY-ST-ZIP | HOUSTON, TX. 77002 | |
| TITLE | AS | ☐ DELETE |
| NAME | JAMES V. DERRICK, JR. | |
| STREET ADDRESS | 1400 SMITH STREET | |
| CITY-ST-ZIP | HOUSTON, TX. 77002 | |
| TITLE | VT | ☐ DELETE |
| NAME | WILLIAM D. GATHMANN | |
| STREET ADDRESS | 1400 SMITH STREET | |
| CITY-ST-ZIP | HOUSTON, TX. 77002 | |
| TITLE | VS | ☐ DELETE |
| NAME | PEGGY B. MENCHACA | |
| STREET ADDRESS | 1400 SMITH STREET | |
| CITY-ST-ZIP | HOUSTON, TX. 77002 | |

**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 | | |

RW 5-14-97

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***165.00

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert J. Hermann Vice-President, Tax 4/21/97 (713)853-5955
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

C63152
12-03-96