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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90209 045 ***150.00

DOCUMENT # P29979

1. Corporation Name
KVAERNER U.S. INC.

Principal Place of Business

~~116 RODDY AVE~~
~~TAX DEPT~~
~~SOUTH ATTLEBORO MA 02703-7974~~
~~US~~

Mailing Address

~~116 RODDY AVE~~
~~TAX DEPT~~
~~SOUTH ATTLEBORO MA 02703-7974~~
~~US~~

2. Principal Place of Business

21 **7909 Parkwood Circle Dr.**

Suite, Apt. #, etc.

22

City & State

23 **Houston, TX**

Zip

24 **77036**

Country

25 **US**

2a. Mailing Address

26 **7909 Parkwood Circle Dr.**

Suite, Apt. #, etc.

27

City & State

28 **Houston, TX**

Zip

29 **77036**

Country

30 **US**

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/27/1990

4. FEI Number

86-0419904

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

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 **PSD** ☒ DELETE

NAME **BUCKLEY, CHARLES E**

STREET ADDRESS **116 RODDY AVE.**

CITY-ST-ZIP **SOUTH ATTLEBORO MA 02703**

TITLE **VPD** ☒ DELETE

NAME **JACHEM, WALTER A**

STREET ADDRESS **116 RODDY AVE.**

CITY-ST-ZIP **SOUTH ATTLEBORO MA 02703**

TITLE **TD** ☐ DELETE

NAME **KARLSEN, KJELL**

STREET ADDRESS **2005 MARKET STREET**

CITY-ST-ZIP **PHILADELPHIA PA 19103**

TITLE **D** ☒ DELETE

NAME **MCGRATH, JOHN J**

STREET ADDRESS **1200 PENN AVE**

CITY-ST-ZIP **PITTSBURGH PA 15222**

TITLE **D** ☒ DELETE

NAME **MOORHOUSE, D.G.**

STREET ADDRESS **20 EASTBOUNRE TERRACE**

CITY-ST-ZIP **LONDON, ENGLAND**

TITLE **D** ☒ DELETE

NAME **BOND, PETER C.**

STREET ADDRESS **2440 CAMINO RAMON**

CITY-ST-ZIP **SAN RAMON CA 94583**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☐ Change ☒ Addition

1.2 NAME **Bond, Peter C.**

1.3 STREET ADDRESS **12657 Alcosta Blvd.**

1.4 CITY-ST-ZIP **San Ramon, CA 94583**

2.1 TITLE **VPD** ☒ Change ☐ Addition

2.2 NAME **Jachem, Walter A.**

2.3 STREET ADDRESS **One Commerce Square, 2005 Market St.**

2.4 CITY-ST-ZIP **Philadelphia, PA 19103**

3.1 TITLE **S** ☐ Change ☒ Addition

3.2 NAME **Haller, Andrew**

3.3 STREET ADDRESS **One Commerce Square, 2005 Market St.**

3.4 CITY-ST-ZIP **Philadelphia, PA 19103**

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: *Walter A. Jachem* Vice-President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99

Date

(215) 972-4340

Daytime Phone #

CR2E034 (11/98)