2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P29979 Aug 15, 2000 8:00 am 1. Entity Name Secretary of State KVAERNER U.S. INC. 08-15-2000 90016 017 ***550.00 Principal Place of Business Mailing Address 7909 PARKWOOD CIRCLE DR 7909 PARKWOOD CIRCLE DR HOUSTON TX 77036 HOUSTON TX 77036 2. Principal Place of Business 3. Mailing Address 440 ROUTE 22 EAST PO BOX 6884 Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 86-0419904 BRIDGEWATER. Not Applicable BRIDGEWATER Country \$8.75 Additional 5. Certificate of Status Desired 08807 08807 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE TITLE ☐ Delete NAME NAME BOND, PETER C STREET ADDRESS STREET ADDRESS 12657 ALCOSTA BLVD CITY-ST-ZIP CITY-ST-ZIP SAN RAMON CA 94583 VPD Change . ■ Addition TITLE vpd X Delete TITLE JACHEM, WALTER A NAME Jachem. Walter a NAME 440 ROUTE 22 EAST STREET ADDRESS STREET ADDRESS ONE COMMERCE SQ., 2005 MARKET ST CITY-ST-ZIP BRIDGEWATER. NJ 08807 CITY-ST-ZIP PHILADELPHIA PA 19103 **Addition** TITLE _ _ X Delete TITLE Change NAME KARLSEN, KJELL NAME MURPHY, JOHN STREET ADDRESS STREET ADDRESS 2005 MARKET STREET 20 EASTBOURNE TERRACE CITY-ST-ZIP CITY-ST-ZIP <u>PHILADELPHIA PA 19103</u> LONDON, W2 6LE, UK ☐ Change Delete TITLE Addition NAME HALLER, ANDREW. NAME PIERSON. GEORGE STREET ADDRESS STREET ADDRESS ONE COMMERCE SQ, 2005 MARKET ST 440 ROUTE 22 EAST CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19103 BRIDGEWATER, NJ 08807 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

USBORTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A Lynnol 1 2000
Daytime Phone #

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