SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P38710

ORYX CRUDE TRADING & TRANSPORTATION, INC.

FILED Aug 08 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 13155 NOEL ROAD 13155 NOEL ROAD DALLAS TX 75240-5067 DALLAS TX 75240-5067 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 05/05/1992 08/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 23-2350487 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes Yes 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 63 City 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 re-instating) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE KAUFMAN, WILLIAM H NAME 1.2 NAME **6818 CLEAR SPRINGS CIRCLE** STREET ADDRESS 1.3 STREET ADDRESS **GARLAND TX 75044** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE HEARTWELL, FRANCES NAME 2.2 NAME 2226 ARBOR CREST STREET ADDRESS 23 STREET ADDRESS **CARROLLTON TX 75007** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME BÖX. JERRY W 3.2 NAME STREET ADDRESS 73211 OAK BLUFF DRIVE 3.3 STREET ADDRESS DALLAS TX 75240 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE X Change Addition TITLE 4.1 TITLE MCGEE, BECKY A. NAME 4. 2 NAME 13155 Noel Rd. 5831 LONDON LANE STREET ADDRESS 4.3 STREET ADDRESS DALLAS TX Dallas, FX 75240-5067 CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE FLOWERS, STEVEN J NAME 5.2 NAME 2808 MCKINNEY AVE #743 STREET ADDRESS 5.3 STREET ADDRESS DALLAS TX 75204 CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 6.1 TITLE EGGLESTON, R. DALE NAME 6.2 NAME 9016 DRUMCLIFFE STREET ADDRESS 6.3 STREET ADDRESS DALLAS TX CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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 all accurate an address.