

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

DOCUMENT # P38710

1. Corporation Name

ORYX CRUDE TRADING & TRANSPORTATION, INC.

Principal Place of Business

**13155 NOEL ROAD
DALLAS TX 75240-5067**

Mailing Address

**13155 NOEL ROAD
DALLAS TX 75240-5067**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date Incorporated or Qualified

05/05/1992

4. FEI Number

23-2350487

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

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 **DP** ☒ DELETE

NAME **KAUFMAN, WILLIAM H**
STREET ADDRESS **6818 CLEAR SPRINGS CIRCLE**
CITY-ST-ZIP **GARLAND TX 75044**

TITLE **D** ☐ DELETE

NAME **HEARTWELL, FRANCES**
STREET ADDRESS **2226 ARBOR CREST**
CITY-ST-ZIP **CARROLLTON TX 75007**

TITLE **DV** ☐ DELETE

NAME **BOX, JERRY W**
STREET ADDRESS **73211 OAK BLUFF DRIVE**
CITY-ST-ZIP **DALLAS TX 75240**

TITLE **S** ☐ DELETE

NAME **MC GEE, BECKY A.**
STREET ADDRESS **13155 NOEL RD**
CITY-ST-ZIP **DALLAS TX**

TITLE **T** ☐ DELETE

NAME **FLOWERS, STEVEN J**
STREET ADDRESS **2808 MCKINNEY AVE #743**
CITY-ST-ZIP **DALLAS TX 75204**

TITLE **AS** ☐ DELETE

NAME **EGGLESTON, R. DALE**
STREET ADDRESS **9016 DRUMCLIFFE**
CITY-ST-ZIP **DALLAS TX**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DP** ☐ Change ☒ Addition

1.2 NAME **Patricia L. Horsfall**
1.3 STREET ADDRESS **13155 Noel Rd.**
1.4 CITY-ST-ZIP **Dallas, TX 75240-5067**

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90091 029 ***150.00



DO NOT WRITE IN THIS SPACE

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