Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90014 032 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # P39107**

1. Corporati	on Name				
MERCA	DO GAS SERVICES INC.		-	1 (#812881 (BB 1216) (BBC 1181) 481(1 188) 1	AIRII AIRII BERII PINII ASSII AIRII EPRI
Principal Pla	ce of Business	Mailing Address		(\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	TIBU OINN BINN BIBU AINN BIRI ISAN
504 LAVACA		504 LAVACA			
SUITE 800 SUITE 800			DO NOT WRITE IN	THIS SPACE	
AUSTIN TX 78701 US AUSTIN TX 78701 US			3. Date Incorporated or Qualifed	THIS STACE	
03		00		06/02/1992	
Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
21		26		74-2447629	Not Applicable
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ate	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 the current year	
24	25		30	Personal Property Tax.	Yes No
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Registe	ired Agent
C 1	CORPORATION SYSTEM		o i Name		
	00 S PINE ISLAND ROAD		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	ANTATION FL 33324		83		
			84 City		FL 85 Zip Code
44 0	at to the employees of Sections 607.0	502 and 607 1508. Florida Statut	es the above-named cor	rporation submits this statement for the purportion's board of directors. I hereby accept the a	se of changing its registered
SIGNATURE	am familiar with, and accept the oblice Signature, typed or printed name of registered a		: Registered Agent signature requi	red when reinstating) DAT	TE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	CD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KELLEY, PETER H		1.2 NAME		
STREET ADDRES			1.3 STREET ADDRESS		
CITY-ST-ZIP	AUSTIN TX	DELETE	1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	*		2.2 NAME		
NAME	ROBILLARD, THOMAS C SS 504 LAVACA #800		2.3 STREET ADDRESS		
STREET ADDRES	AUSTIN TX		2. 4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	S	☐ DELETE	3.1 TITLE		Change Addition
NAME	MORGAN, DENNIS K	_	3.2 NAME		
STREET ADDRES	FO4 1 41/4 O4 #000		3.3 STREET ADDRESS		
CITY-ST-ZIP	AUSTIN TX		3.4. CITY-ST-ZIP		
TITLE	P	☐ DELETE	4.1 TITLE		Change Addition
NAME	ENDRES, RONALD J		4. 2 NAME		
STREET ADDRES	1		4.3 STREET ADDRESS		
CITY-ST-ZIP	AUSTIN TX	P-1 0-1 0-1	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	T	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	YANKOWSKI, GEORGE E		5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRES			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
CITY-ST-ZIP	AUSTIN TX	☐ DELETÉ	6.1 TITLE		☐ Change ☐ Addition
TITLE			6.2 NAME		
NAME CTREET ADDRES			6.3 STREET ADDRESS		
STREET ADDRES	160				

CITY-ST-ZIP 14. I hereby certify that the information submied with this filipe 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 frue 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 suppowered 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 a address with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

512-370-8220