

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

FILED

97 JUL 29 AM 9: 23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000056804 (6)

1. Corporation Name
PETROQUIP SERVICE, INC.

Principal Place of Business

20125 SW ARCHER RD
ARCHER FL 32618

Mailing Address

P.O. BOX 853
GAINESVILLE FL 32602

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3196125

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

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30

9. Name and Address of Current Registered Agent

SULLIVAN, JAMES KENT
20125 S.W. ARCHER ROAD
ARCHER FL 32618

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 NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

PT
SULLIVAN, JAMES K
20125 SW ARCHER RD
ARCHER FL 32618

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

SV
SULLIVAN, DOROTHY J
20125 SW ARCHER RD
ARCHER FL 32618

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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***165.00 ***165.00

☐ Change ☐ Addition

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14. I do 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.

SIGNATURE *James Kent Sullivan* July 22 1997 352-485-3812

CR2E034 (4/97)

7-22-97

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To Whom it Concerns,

On April 20th 1997 we sent our Annual Corporate Report form to your office with the appropriate check. Since this time we became aware that the check for \$165.00 did not clear our bank.

On July 7, 1997 we called your office and spoke to Carol and were informed that our Annual Report had not been received by your office. She advised us to call 481-6056 and request another report form and to send this form with another check for \$165.00 to your office.

We certainly hope this has not caused you undue inconvenience and if you have located the original corporate report and payment (check #835) please disregard this letter and return the enclosed check.

If you have any questions we can be reached at 352-495-3310 (office) or paged at 888-582-7998.

Thank you for your help in this matter.

Best Regards,
Dorothy J. Sullivan
V.P.

Petroquip Service Inc.