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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000042931 (2)

U.S. DRILLING CORP.

Principal Place of Business

Mailing Address

FILED Feb 27 1997 8:00am Secretary of State



442 N.W. 35TH BOCA RATON F		442 N.W. 35TH STREET BOCA RATON FL 33431-5708								
						3. Date Incorporated or Qualified 06/02/1995		e of Last Re 1/1996	`	
2. Principal Pla	2a, Mailing Address	ing Address			4, FEI Number		Ap	plied For		
21		26			65-0612225			t Applicable		
Suite, Apt. #	f, etc	Suite, Apt. #, etc.	-··n			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & Stale	├ ── , '			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Ζιρ 24	Country 25	Ζφ 29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered A	gent		
ROS	ENTHAL, ALEX P ESQ.			В1	Name					
ONE EAST BROWARD BLVD SUITE 620 FT LAUDERDALE FL 33301					Street Ado	1 Address (P.O. Box Number is Not Acceptable)				
				83					}	
				84	City		FL	85 Zip (Code	
office or re agent. Lar SiGNATURE	egistered agent, or both, in the St n familiar with, and accept the ot	ale of Florida. Such change was oligations of, Section 607.0505, F	s authorizei Florida Stat	d by utes	the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ot the appo	changing its intraent as	s registered registered	
	Stgoature, typed or punted name of registered			d Age	nt signature requ	uired when re-instating)	DATE		0.01.40	
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		Change	Addition	
TITLE	Р	☐ DELETE		1.1 TITLE			ļ	Change	L.J AUGILION	
NAME	KAUB, FRED		12 N		1					
STREET ADDRESS	442 N.W. 35TH ST		1.3 51	REET	ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 CI		T-ZIP			Channa	Addition	
THE	VP L DELETE			2.1 TITLE			,	Change	Manifold	
NAME	FRIONE, FRANK		2.2 N	2.2 NAME						
STHEET ADDRESS	442 N.W. 35TH ST			TREET	ADORESS					
CITY - ST - ZIP	BOCA RATON FL 33431				ST-ZIP			10	111 622000	
THLE	[_] DELETE			TLE			į	Change	Addition	
NAME			3.2 N							
STREET ADDRESS			3.3 S	IREET	ADDRESS					
CITY ST-ZIP					ST-ZIP	HELPHY W. T.		Chance	A delbi	
τοιε		[_] DELETE	4.1 Ti					Change	Addition	
NAME			4.2 N	IAME						
STREET ADDRESS			4.3 S	TREET	ADDRESS					
CITY-ST 7IF					iT - ZIP			0	11110	
TITLE		☐ DELETE	5.1 11	ITLE				L Change	Addition	
NAME			5.2 N	AME	1					
STREET ADDRESS			5.3 S	TREET	ADDRESS					
City - St - 7iP			5.4 C	ITY - S	T - ZIP					
TITLE		☐ DELETE	6.1 1	ITLE				Change	Addition	
NAME			6.2 N	AME						
STREET ADDRESS			6.3 S	TREET	ADDRESS					
CITY-SI-ZIP			6.4 0	1TY-5	ST - ZIP					
						and in Constitute 440 02/03/3. Florido Ctotudo	- 1 f da	annelifications	45-	

14. If 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 and cated on thus 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, if the corporation or the receiver or flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name ment with an address

SIGNATURE: