


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Oct 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P97000009000 (5) 1. Corporation Name CAMERON INTERNATIONAL, INC.		



Principal Place of Business 4630 S. KIRKMAN ROAD SUITE 401 ORLANDO FL 32811	Mailing Address 4630 S. KIRKMAN ROAD SUITE 401 ORLANDO FL 32811
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 777 E. ATLANTIC AVE Suite, Apt. #, etc. 22 # 329 City & State 23 DELRAY BEACH FLORIDA Zip 24 33483		2a. Mailing Address 26 777 E. ATLANTIC AVE Suite, Apt. #, etc. 27 # 329 City & State 28 DELRAY BEACH FLORIDA Zip 29 33483		3. Date Incorporated or Qualified 01/24/1997	
		4. FEI Number 65-0856639		Applied For Not Applicable	
		5. Certificate of Status Desired 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		8.75 Additional Fee Required \$5.00 May Be Added to Fees Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

9. Name and Address of Current Registered Agent JORDAN, C 4630 S. KIRKMAN ROAD SUITE 401 ORLANDO FL 32811		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
		SAME 777 E. ATLANTIC AVE # 329 DELRAY BEACH FL 33483	

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 C. Cameron Jordan R. Cameron Jordan 9/20/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature Required When Relinquishing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSJD JORDAN, C 4789 J WARDEN CIRCLE ORLANDO FL 32811	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	777 E. ATLANTIC AVE # 329 DELRAY BEACH, FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 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.

SIGNATURE: R. Cameron Jordan 9/20/98 561-266-9555

CR2E034 (5/98)