2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 23, 2001 08:00 AM P98000009206 DOCUMENT # Entity Name **Secretary of State** ESI WEST TEXAS ENERGY, INC. Principal Place of Business Mailing Address 700 UNIVERSE BLVD. ATTN: RITA W. COSTANTINO 700 UNIVERSE BLVD. JUNO BEACH FL JUNO BEACH FL 33408 33408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0810389 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 9250 WEST FLAGLER STREET Street Address (P.O. Box Number is Not Acceptable) МІАМІ FL33174 US Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 04/23/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 AS TITLE CR2E034 (11/00) ☐ Delete TITLE ☐ Addition X Change HATHAWAY SCOT MAME \mathbf{C} NAME TANCER EDWARD 700 UNIVERSE BLVD. STREET ADDRESS STREET ADDRESS 700 UNIVERSE BLVD. CITY-ST-ZIP JIINO BCH FL 33408 CITY-ST-ZIP JUNO BCH AS ☐ Delete TITLE ☐ Change NAME COSTANTINO RITA w NAME STREET ADDRESS 700 UNIVERSE BLVD. STREET ADDRESS CITY-ST-ZIP JUNO BCH FL. 33408 CITY-ST-ZIP ☐ Delete TITLE X Change ☐ Addition NAME SAMIL MCGRATH ROBERT NAME STREET ADDRESS 700 UNIVERSE BLVD. STREET ADDRESS 700 UNIVERSE BLVD. CITY-ST-ZIP ЈИНО ВСН 33408 CITY-ST-ZIP JUNO BCH FL. 33408 ☐ Delete TITLE DV **X** Change ☐ Addition HOFFMAN KENNETH NAME LEIGHTON MICHAEL. STREET ADDRESS 700 UNIVERSE BLVD STREET ADDRESS 700 UNIVERSE BLVD CITY-ST-ZIP ЛИМО ВСН 33408 CITY-ST-ZIP JUNO BCH 33408 FL. TITLE Delete TITLE ☐ Change ☐ Addition MORRISON ROBERT NAME STREET ADDRESS 700 UNIVERSE BLVD STREET ADDRESS CITY-ST-ZIP JUNO BCH 33408 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition MICHAEL YACKIRA NAME НАҮ Ш STREET ADDRESS 700 UNIVERSE BLVD STREET ADDRESS 700 UNIVERSE BLVD CITY-ST-ZIP JUNO BCH CITY-ST-ZIP 33408 JUNO BCH 33408 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

04/23/2001

Date

Daytime Phone #

RITA W. COSTANTINO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _