

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 04, 2000 8:00 am**  
**Secretary of State**

04-04-2000 90086 042 \*\*\*150.00

B0052059

DO NOT WRITE IN THIS SPACE

**DOCUMENT #** F93000004739 ✓  
**1. Entity Name**  
 HYDROCHEM INDUSTRIAL SERVICES, INC.

**Principal Place of Business**  
 900 Georgia Ave.  
 Deer Park, TX 77536

**Mailing Address**  
 900 Georgia Ave.  
 Deer Park, TX 77536

**2. Principal Place of Business**  
 900 Georgia Ave  
 Suite, Apt. #, etc.

**3. Mailing Address**  
 900 Georgia Ave  
 Suite, Apt. #, etc.

**City & State**  
 Deer Park, Texas

**City & State**  
 Deer Park, Texas

**4. FEI Number**  
 75-2503906

**Applied For**  
 Not Applicable

**Zip**  
 77536

**Country**  
 US

**Zip**  
 77536

**Country**  
 USA

**5. Certificate of Status Desired**  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**Name**  
 C. T Corporation System

**Street Address (P.O. Box Number is Not Acceptable)**  
 1200 S. Pine Island Rd.

**City**  
 Plantation

**FL** **Zip Code**  
 33324

**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** \_\_\_\_\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**DATE** \_\_\_\_\_

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.**  **(See criteria on back)**

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing Trust Fund Contribution.**  **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	CEO/Director	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	B. Tom Carter, Jr.		
STREET ADDRESS	900 Georgia Ave.		
CITY-ST-ZIP	Deer Park, TX 77536		
TITLE	Director	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Robert B. Crates		
STREET ADDRESS	201 Main Street, Suite 2201		
CITY-ST-ZIP	Fort Worth, TX 76102		
TITLE	Secy	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Michael P. Steindler		
STREET ADDRESS	900 Georgia Ave.		
CITY-ST-ZIP	Deer Park, TX 77536		
TITLE	VP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Pelham H. Smith		
STREET ADDRESS	900 Georgia Ave.		
CITY-ST-ZIP	Deer Park, TX 77536		
TITLE	Selby F. Little III	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	900 Georgia Ave.		
STREET ADDRESS	Deer Park, TX 77536		
CITY-ST-ZIP			
TITLE	Treas./Assist. Secy.	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Chris Conrad		
STREET ADDRESS	900 Georgia Ave.		
CITY-ST-ZIP	Deer Park, TX 77536		

**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.**

**SIGNATURE:**  **Chris R. Conrad** **3/30/00** **713-393-5600**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)