

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90039 019 ***150.00

DOCUMENT # F97000001511

1. Entity Name
FLUOR INDUSTRIAL SERVICES, INC.

00037681



DO NOT WRITE IN THIS SPACE

Principal Place of Business ONE ENTERPRISE DR. F2B ALISO VIEJO CA 92656 US	Mailing Address ONE ENTERPRISE DR. F2B ALISO VIEJO CA 92656 US
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **33-0432280** Applied For
 Not Applicable

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

**NRAI SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 _____ DATE _____
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 Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
DS	FISHER, L.N.	ONE ENTERPRISE DR.	ALISO VIEJO CA 92656	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
P	SMITH, H.R.	100 FLUOR DANIEL DR.	GREENVILLE SC 29607	<input checked="" type="checkbox"/>	PRESIDENT	R.G. PETERSON	ONE ENTERPRISE DR.	ALISO VIEJO, CA 92656	<input type="checkbox"/>	<input type="checkbox"/>
VT	HULL, S.F.	ONE ENTERPRISE	ALISO VIEJO CA 92656	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
AT	MORROW, T.H.	ONE ENTERPRISE	ALISO VIEJO CA 92656	<input checked="" type="checkbox"/>	ASST. TREASURER	MIN C. TSENG	ONE ENTERPRISE DR	ALISO VIEJO, CA 92656	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	WALTON, M H	100 FLUOR DANIEL DR	GREENVILLE SC 29607	<input checked="" type="checkbox"/>	VICE PRESIDENT	B.B. ISOM	ONE ENTERPRISE DR.	ALISO VIEJO, CA 92656	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CFO	HAKE, R F	ONE ENTERPRISE	ALISO VIEJO CA 92656	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: Min C. Tseng **Min C. TSENG** 4-3-01 949349.6091
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)