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FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P14261 (2)

1. Corporation Name
AGGREKO, INC.

Principal Place of Business 4807 W. ADMIRAL DOYLE DRIVE NEW IBERIA LA 70560	Mailing Address 4807 W. ADMIRAL DOYLE DRIVE NEW IBERIA LA 70560
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

3. Date Incorporated or Qualified
05/01/1987

4. FEI Number
72-0692213

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

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

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Take off Report - no longer with the company
NAME	DELHOMME, A.J.	1.2 NAME	
STREET ADDRESS	4807 W. ADMIRAL DOYLE DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW IBERIA LA 70560	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	President
NAME	HARROWER, PHILLIP	2.2 NAME	
STREET ADDRESS	4807 W. ADMIRAL DOYLE DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW IBERIA LA 70560	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	Take off Report - no longer an officer
NAME	POOL, DALE	3.2 NAME	
STREET ADDRESS	4807 W. ADMIRAL DOYLE DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW IBERIA LA 70560	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	Vice president EXECUTIVE
NAME	WALKER, GEORGE	4.2 NAME	
STREET ADDRESS	3732 MAGNOLIA ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	PEARLAND TX	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	
NAME	LADT, C. ANTHONY	5.2 NAME	
STREET ADDRESS	4807 W. ADMIRAL DOYLE DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW IBERIA LA 70560	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	
NAME	DRESSEL JR, TERREL	6.2 NAME	
STREET ADDRESS	4807 W ADMIRAL DOYLE DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW IBERIA LA	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.

CR2E034 (10/97)