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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

CERTIFIED
DATE M

DOCUMENT # P18465 (5)
1. Corporation Name
OCCIDENTAL CRUDE SALES, INC.



Principal Place of Business Mailing Address
2000 POST OAK BLVD. HOUSTON TX 77066-4409 US
P. O. BOX 300 TULSA OK 74102-0300 US

3. Date Incorporated or Qualified 03/17/1988
3a. Date of Last Report 02/01/1996
4. FEI Number 94-3051926
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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYS STREET
STE - 105
TALLAHASSEE FL 32301

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 Signature typed or printed name of registered agent and time if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE AS DELETED
NAME PARISE, STEPHEN P.
STREET ADDRESS 10889 WILSHIRE BLVD.
CITY-ST-ZIP LOS ANGELES CA
TITLE VT DELETED
NAME GRUBERTH, F.J.
STREET ADDRESS 10889 WILSHIRE BLVD.
CITY-ST-ZIP LOS ANGELES CA
TITLE DP DELETED
NAME WOOD, ROBERT L.
STREET ADDRESS 2000 POST OAK BLVD.
CITY-ST-ZIP HOUSTON TX
TITLE D DELETED
NAME MARTIN, D.R.
STREET ADDRESS 1200 DISCOVERY DR
CITY-ST-ZIP BAKERSFIELD CA
TITLE AS DELETED
NAME ROSS, DAVID G
STREET ADDRESS 110 WEST 7TH STREET
CITY-ST-ZIP TULSA OK
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME AT
2.3 STREET ADDRESS GREEN, SHELLEY D.
2.4 CITY-ST-ZIP 10889 WILSHIRE BLVD.
LOS ANGELES CA 90024
3.1 TITLE Change Addition
3.2 NAME P/D
3.3 STREET ADDRESS MILLER, MICHAEL P.
3.4 CITY-ST-ZIP 1200 DISCOVERY DR.
BAKERSFIELD CA 90024
4.1 TITLE Change Addition
4.2 NAME V/S
4.3 STREET ADDRESS PETERSON, LINDA A.
4.4 CITY-ST-ZIP 10889 WILSHIRE BLVD.
LOS ANGELES CA 90024
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME D
6.3 STREET ADDRESS NIEHAUS, JAMES R.
6.4 CITY-ST-ZIP 1200 DISCOVERY DR.
BAKERSFIELD CA 93309

14. I do 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: David G. Ross 4-24-97 (918) 561-3497
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)