

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Apr 22 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000005219 (1)
1. Corporation Name
STRATEGIC MATERIALS, INC.



Principal Place of Business 5151 SAN FELIPE SUITE #1400 HOUSTON TX 77056	Mailing Address 5151 SAN FELIPE SUITE #1400 HOUSTON TX 77056-3609
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3. Date Incorporated or Qualified 11/17/1993	3a. Date of Last Report 11/26/1996
4. FEI Number 76-0297116	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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9. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLHASSEE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HALE, RANDALL B		1.2 NAME	
STREET ADDRESS 5151 SAN FELIPE, SUITE 1400		1.3 STREET ADDRESS	
CITY-ST-ZIP HOUSTON TX 77056		1.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CORLEY, I T		2.2 NAME	
STREET ADDRESS 5151 SAN FELIPE, SUITE 1400		2.3 STREET ADDRESS	
CITY-ST-ZIP HOUSTON TX 77056		2.4 CITY-ST-ZIP	
TITLE D	<input checked="" type="checkbox"/> DELETE	3.1 TITLE CONTROLLER / TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME WREN, WAYNE		3.2 NAME JERRY PARKER	
STREET ADDRESS 5151 SAN FELIPE, SUITE 1400		3.3 STREET ADDRESS 5151 SAN FELIPE, SUITE 1400	
CITY-ST-ZIP HOUSTON TX 77056		3.4 CITY-ST-ZIP HOUSTON, TX 77056	
TITLE P	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BOWLES, STEVEN B		4.2 NAME	
STREET ADDRESS 5151 SAN FELIPE, SUITE 1400		4.3 STREET ADDRESS	
CITY-ST-ZIP HOUSTON TX 77056		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LEHMAN, NOLAN		5.2 NAME	
STREET ADDRESS 5151 SAN FELIPE, SUITE 1400		5.3 STREET ADDRESS	
CITY-ST-ZIP HOUSTON TX 77056		5.4 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BUCEY, CURTIS R		6.2 NAME	
STREET ADDRESS 5151 SAN FELIPE, SUITE 1400		6.3 STREET ADDRESS	
CITY-ST-ZIP HOUSTON TX 77056		6.4 CITY-ST-ZIP	

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: Jerry Parker **SIGNATURE REQUIRED** **JERRY PARKER** **2/25/97** **713/622-3900**
Date Daytime Phone 6011967

CR2E034 (9/96)