

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90178 042 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # F93000005219			
1. Entity Name STRATEGIC MATERIALS, INC.			
Principal Place of Business 15900 N BARKERS LANDING STE 150 HOUSTON TX 77079		Mailing Address 15900 N BARKERS LANDING STE 150 HOUSTON TX 77079	
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 76-0297116		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLHASSEE 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. <input type="checkbox"/> <small>(See criteria on back)</small>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALE, RANDALL B	NAME	
STREET ADDRESS	2929 ALLEN PARKWAY	STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77019	CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORLEY, I T	NAME	
STREET ADDRESS	15990 N BARKERS LANDING, STE 150	STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	CITY-ST-ZIP	
TITLE	SRVT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOERTZ, ALLAN	NAME	
STREET ADDRESS	15990 N BARKERS LANDING, STE 150	STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	CITY-ST-ZIP	
TITLE	PCEO <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORLEY, I. T.	NAME	
STREET ADDRESS	15990 N BARKERS LANDING, STE 150	STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEHMAN, NOLAN	NAME	
STREET ADDRESS	2929 ALLEN PARKWAY	STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77019	CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUCEY, CURTIS	NAME	
STREET ADDRESS	15990 N BARKERS LANDING, STE 150	STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	CITY-ST-ZIP	

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: *Allan J. Goertz* **ALLAN J. GOERTZ, SR. V.P.** **3-22-02** **281-966-5700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)