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TX2014 05-102 (Rev.9-13/32) Ver. 5.0

Texas Franchise Tax Public Information Report
To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions
This report MUST he stand and filed to satisfy franchise tax requirements

■ Tcode 13196	ne signed and	i illeu to s	atisty tranchise to	ax requi	entents					
Taxpayer number	<u> </u>	Report year			You have certain rights under Chapter 552 and 559 Government Code, to review, request and correct information					
30010613385 ·	201	.4		we have on file about you. Contact us at 1-800-252-1381.						
WESSIATILL INC					Check t	ox if the mailin				
1800 BERING SUITE 945					Secretary of State (SOS) file number or Comptroller file number					
HOUSTON State TX		 -	77057	Plus 4		010	421940	0		
Check box if there are currently no changes from previous ye	ar; If no informa	tion is disp	layed, complete th	ié applica	ble informat	ion in Sections	A, B and C.			
Principal office 1800 BERING SUITE 945 HOUSTO	N TX 77	057								
Principal place of business 1800 BERING SUITE 945 HOUSTON TX 77057										
Please sign below! Officer, director and manager infor Report is completed. The informative report. There is no requirement or officers, directors, or managers characteristics. SECTION A Name, title and mailing address of each officer, directors.	on is updated a procedure for s ange throughou	nnually as upplement it the year.	part of the franchis	se tax		3	0010613	338514		
Name	Title			Director		m	m d	d y y		
JOE F WHEAT	S TREAS			Y	S Expi	ration 1	2 3 1 :	16		
alling address City Houston			<u></u>		Stat T	<u> </u>	ZIP Cox	 008		
Name	Title			Director	 -	m	m d	d y y		
ALAN SHELBY	PRES	PRES			YES expiration 1 2 3 1 1 6					
Melling address 1800 BERING STE 945	Giy Houston				Stat	ZIP Code 77057				
Name	Title	- -			Terr	m	m d	d y y		
PEDRO BENITEZ	V PRE	V PRES			1	ration 1 2	2 3 1 3	L 6		
Mailing address 1800 BERING STE 945	Houst	Giy Houston			TX ZIP Code 77057					
SECTION B Enter the Information required for each corporation	or LLC, if any, I	n which thi	s entity owns an In	terest of	10 percent o	or more.				
Name of owned (subsidiary) corporation or limited liability company		State of formation			Texas SOS file number, if any Percentage of ownership					
Name of owned (subsidiary) corporation or limited liability company		State of formation		Те	Texas SOS file number, if any Percentage of ownership					
SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.										
Name of owned (parent) corporation or limited liability company		State of formation			Texas SOS file number, if any Percentage of ownership					
Registered agent and registered office currently on file (see instructions if yo	u need to make c	hanges)				need forms to ci				
Agent JOE F WHEAT			City	LJ the	registered ag	ent or registered State	office information			
Office: 2600 CITADEL PLAZA DR STE	105		Houst	on_		T		7008		
The above information is required by Section 171.203 of the Tax Code for eac for Sections A, B, and C, if necessary. The information will be evaliable for pu		mited liabilit	y company that files	a Texas F	ranchise Tax i	Report. Use addi	ional sheets			
I declare that the information in this document and any attachments is true as been malled to each person named in this report who is an officer, director or		•	•							
sign here alla Shell	πι Ο	FFICER		Date 02/08/201		4 Area code and phone number (713) 975 - 2525				
<u>, , , , , , , , , , , , , , , , , , , </u>	exas Compl	roller Off	icial Use Only							
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