

1.) CORPORATION NAME:

SAUDI REFINING, INC.

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F0588428**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9009 W LOOP S

CITY/ST/ZIP: HOUSTON, TX 77096

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	T.H. AL-GABSANI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	9009 WEST LOOP SOUTH		
CITY/ST/ZIP/CO:	HOUSTON, TX 77096		

NAME:	JIM M STORM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9009 WEST LOOP SOUTH		
CITY/ST/ZIP/CO:	HOUSTON, TX 77096		

NAME:	DEBORAH A MCNAMARA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	9009 WEST LOOP SOUTH		
CITY/ST/ZIP/CO:	HOUSTON, TX 77096		

NAME:	P. RUSSELL JEFFCOAT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	9009 WEST LOOP SOUTH		
CITY/ST/ZIP/CO:	HOUSTON, TX 77096		

NAME:	MARK K MURPHY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9009 WEST LOOP SOUTH		
CITY/ST/ZIP/CO:	HOUSTON, TX 77096		

NAME:	DAWOOD AL-DAWOOD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	SAUDI ARABIAN OIL COMPANY DHAHRAN,,31311,SAUDI ARABIA		
CITY/ST/ZIP/CO:	, , FN		

NAME: ALI AL-LAFI TITLE: DIRECTOR ADDRESS: 9009 WEST LOOP SOUTH CITY/ST/ZIP/CO: HOUSTON, TX 77096	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: AHMED ALZAYYAT TITLE: DIRECTOR ADDRESS: 9009 WEST LOOP SOUTH CITY/ST/ZIP/CO: HOUSTON, TX 77096	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: IBRAHIM K NAIMI TITLE: DIRECTOR ADDRESS: 527 MADISON AVE. CITY/ST/ZIP/CO: NEW YORK, NY 10022	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ P. RUSSELL JEFFCOAT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	P. RUSSELL JEFFCOAT, CONTROLLER PRINTED NAME AND CORPORATE TITLE	9/27/2012 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		