

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 25, 2002 8:00 am**  
**Secretary of State**

02-25-2002 90576 039 \*\*\*150.00

061553 AT

**DOCUMENT # F01000003226**

1. Entity Name

**PERMANENT RECORDS MANAGEMENT, INC.**

Principal Place of Business

**3232 MCKINNEY AVENUE, SUITE 1000  
 DALLAS TX 75204**

Mailing Address

**3232 MCKINNEY AVENUE, SUITE 1000  
 DALLAS TX 75204**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**52-2138693**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UNITED CORPORATE SERVICES, INC.  
 9200 SOUTH DADELAND BLVD., STE 508  
 MIAMI FL 33156**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**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.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>C</b>	<input type="checkbox"/> Delete
NAME	<b>BOWMAN, ED H JR.</b>	
STREET ADDRESS	<b>3232 MCKINNEY AVENUE, SUITE 1000</b>	
CITY-ST-ZIP	<b>DALLAS TX 75204</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>WALKER, THOMAS C</b>	
STREET ADDRESS	<b>3232 MCKINNEY AVENUE, SUITE 1000</b>	
CITY-ST-ZIP	<b>DALLAS TX 75204</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>ROSE, JOE A</b>	
STREET ADDRESS	<b>3232 MCKINNEY AVENUE, SUITE 1000</b>	
CITY-ST-ZIP	<b>DALLAS TX 75204</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>ZAZWORSKY, RONALD</b>	
STREET ADDRESS	<b>3232 MCKINNEY AVENUE, SUITE 1000</b>	
CITY-ST-ZIP	<b>DALLAS TX 75204</b>	
TITLE	<b>V</b>	<input type="checkbox"/> Delete
NAME	<b>PATTERSON, NEIL</b>	
STREET ADDRESS	<b>7231 BAKER BOULEVARD</b>	
CITY-ST-ZIP	<b>FT. WORTH TX 76118</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Delete
NAME	<b>GILBERT, CHARLES S</b>	
STREET ADDRESS	<b>3232 MCKINNEY AVENUE, SUITE 1000</b>	
CITY-ST-ZIP	<b>DALLAS TX 75204</b>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Patterson, Neil</b>	
STREET ADDRESS	<b>7231 Baker Blvd</b>	
CITY-ST-ZIP	<b>Ft. Worth TX 76118</b>	
TITLE	<b>Vice President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Edwards, Barry</b>	
STREET ADDRESS	<b>3232 McKinney Ave Ste 1000</b>	
CITY-ST-ZIP	<b>Dallas, TX 75214</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

*Barry Edwards*  
**BARREY EDWARDS**

*2/5/02*  
 Date

*214 953 7866*  
 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)