

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92000000543 (0)

1. Corporation Name
KBGP, INC.



Principal Place of Business: C/O SHERATON ASTRODOME HOTEL/ATN: HARTER 8686 KIRBY DRIVE HOUSTON TX 77054
Mailing Address: C/O SHERATON ASTRODOME HOTEL/ATN: HARTER 8686 KIRBY DRIVE. SUITE 4210 HOUSTON TX 77054 US

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-fields for Suite, Apt. #, etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: 12/04/1992
3a. Date of Last Report: 03/20/1995
4. FEI Number: 76-0382941
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 registering.)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	TROTTER, JACK T	
STREET ADDRESS	FIRST INTERSTATE BANK PLAZA, SUITE 3800	
CITY - ST - ZIP	HOUSTON TX 77002	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	HARTER, ROBERT G	
STREET ADDRESS	8686 KIRBY DRIVE, #1210	
CITY - ST - ZIP	HOUSTON TX	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GUNN, NEAL	
STREET ADDRESS	8686 KIRBY DRIVE, #1210	
CITY - ST - ZIP	HOUSTON TX	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	LYNCH, DAVID L	
STREET ADDRESS	8686 KIRBY DRIVE, SUITE 1210	
CITY - ST - ZIP	HOUSTON TX	
TITLE	V	<input type="checkbox"/> DELETE
NAME	KRIZ, DONALD R	
STREET ADDRESS	8686 KIRBY DRIVE, #1210	
CITY - ST - ZIP	HOUSTON TX	
TITLE	V	<input type="checkbox"/> DELETE
NAME	KELLER, GARY	
STREET ADDRESS	8686 KIRBY DRIVE, #1210	
CITY - ST - ZIP	HOUSTON TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	
14. CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert G. Harter* ROBERT G. HARTER 6/15/96 (713) 795-8490
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT

CR2E034 (3/96)