## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

F93000004730 (8)

SWEATAC, INC.

**DOCUMENT #** 1. Corporation Name

Principal	mace	O.	Busines

Mailing Address



402 WEST I- GARLAND T		402 WEST 1-30 GARLAND TX 75043							
					3. Date Incorporated or Qualified 10/20/1993	3a. Date of Last Report 05/17/1995			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For			
21		26			75-2504207	Not Applicable			
Suite, Apl. #		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be			
23	<del></del>		l		Added to Fees				
Zip	Country	Ζ <sub>(</sub> ρ	Count	, , , , , , , , , , , , , , , , , , , ,					
24	25 9. Name and Address of Curre	29  nt Pagislared Agent	30		Florida Statutes Yes No  10. Name and Address of New Registered Agent				
	5. Name and Address of Curren	iii negisieleu Ageili		1 Name	IV. Name and Address of New P	registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM INC			8	82 Street Address (P.O. Box Number is Not Acceptable)					
	1201 HAYES ST			3					
STE - 1				<u> </u>					
TALLAH	IASSEE FL 32301		В	4 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 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.	, ,								
	Signature, typed or printed name of registered agen		· · · · · · · · · · · · · · · · · · ·	ent signature re	aguired when reinslating)	DATE			
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF				
TITLE	PD	DELETE	1 : THIL			Change Addition			
NAME	RATNER, PHILLIP		1.2 NAM	- 1		700			
STREET ADDRESS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	402 WEST 1-30 1.3 STREET.							
CITY-ST-ZIP	GARLAND TX 75043	E Britis	1.4 CITY						
THLE	00	☐ DELETE	2 1 TITL	- 1		Change Addition			
NAME	CARRINGTON, JR, H G		2.2 NAM	- 1					
STREET ADDRESS	402 WEST I-30			F1 ADDRESS	· ·				
CHY-ST-ZIP TITLE	GARLAND TX	<b>DX</b> DELETE		- \$1 - 712		Channa C Addition			
NAME	S DIETE CTACY	De Detter	3 1 TITL	- 1		☐ Change ☐ Addition			
STREET ADDRESS	RIFFE, STACY 402 WEST 1-30		3.2 NAM	- 1					
	GARLAND TX		•	EFT ADDRESS					
CITY-ST-ZIP TITLE	AS	☐ DELETE	3.4 CITY 4. 1 TITL		SECRETARY	Change Addition			
NAME	HACKEMACK, WENDY		4.2 NAM	- 1	SECRETARY	Proguence D vocation			
STREET ADDRESS	402 WEST 1-30			E1 ADDRESS					
CITY-ST-ZIP	GARLAND TX 75043		4.4 CITY	I					
TITLE	WHIPHID IN 19073	DELETE	5. 1 TITL			Change Addition			
NAME		<b></b>	5.2 NAM	- 1					
STREET ADDRESS				ET ADDRESS					
CITY - S1 - ZIP			5.4 CITY	- 1					
TITLE		DELETE	6. 1 TI7L			Change Addition			
NAME		le tand	6.2 NAM	I					
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			6.4 CITY	I					
		with this filing is voluntarily furn			lify 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 redeliver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if manged, or on an attachment with any address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR