

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90020 047 ***150.00

DOCUMENT # F94000002996

1. Entity Name
GRUMA CORPORATION

Principal Place of Business 1159 COTTONWOOD LANE SUITE 200 IRVING TX 75038 US	Mailing Address 1159 COTTONWOOD LANE SUITE 200 IRVING TX 75038-6109 US
-------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
-------------------------------------------------------	-------------------------------------------

City & State	City & State	4. FEI Number 95-3576486	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

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

7. Name and Address of New Registered Agent
 Name
Corporation Service Company
 Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
 City
Tallahassee **FL** Zip Code
32301

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 *Ann Jeanette Baechle* **Ann Jeanette Baechle, Authorized Rep** **March 10, 2000**
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, 2000 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RICOY, MARTIN 159 COTTONWOOD LN STE 200 IRVING TX 75038 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VELEZ, JAVIER 159 COTTONWOOD LN STE 200 IRVING TX 75038 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LIVAS, EDUARDO 159 COTTONWOOD LN STE 200 IRVING TX 75038 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ELIAS, SALVADOR 1159 COTTONWOOD LN STE 200 IRVING TX 75038 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MUHLESTEIN, RANDOLPH G 1159 COTTONWOOD LN STE 200 IRVING TX 75038 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRUNNER, TOM 1159 COTTONWOOD LN STE 200 IRVING TX 75038 <input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTIN RICCOY 1159 Cottonwood Ln., suite 200 IRVING, TX 75038 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO JAVIER VELEZ BARTISTA 1159 Cottonwood Ln., suite 200 IRVING, TX 75038 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOEL SUAREZ 1159 COTTONWOOD LN., SUITE 200 IRVING, TX 75038 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE 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: *Salvador Elias* **SALVADOR ELIAS** Date **(972) 232-5000** Daytime Phone #

CR2E034 (9/99)