FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED
95 MAY -1 AM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000006284 (3)**

1. Corporate Name

AUSTIN BUILDERS, INC.

Principal Place of Business	Mailing Address
3535 TRAVIS SUITE 300 DALLAS TX 75204	3535 TRAVIS SUITE 300 DALLAS TX 75204

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/08/1994**

3a. Date of Last Report:

2. Principal Place of Business — 21:

2a. Mailing Address — 26:

Suite, Apt. # or P.O. Box — 22:

Suite, Apt. # or P.O. Box — 27:

City & State — 23:

City & State — 28:

Zip — 24: County — 25:

Zip — 29: County — 30:

4. FEI Number: **75-2501531** ☐ Applied For ☐ Not Applicable

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1203 (1) or 617.1803 (1), 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. The corporation's Board of Directors hereby authorizes the appointment of registered agent and the address thereof stated above for the purpose of complying with and accepting the obligations of Section 607.0505 or 617.0501, Florida Statutes.

SIGNATURE

12. OFFICER/DIRECTOR	13. ADDITIONS/CHANGES TO OFFICERS AND/OR DIRECTORS
TITLE: PD NAME: GAFFORD, RONALD J STREET ADDRESS: 3523 TRAVIS ST. CITY-ST-ZIP: DALLAS TX 75204	☐ Change ☐ Addition
TITLE: VAS NAME: WARNICK, STEVEN W STREET ADDRESS: 3523 TRAVIS ST. CITY-ST-ZIP: DALLAS TX 75204	☐ Change ☐ Addition
TITLE: S NAME: STAKEM, ALAN P STREET ADDRESS: 3523 TRAVIS ST. CITY-ST-ZIP: DALLAS TX 75204	☐ Change ☐ Addition
TITLE: TAS NAME: SCHRANZ, JAMES E STREET ADDRESS: 3523 TRAVIS ST. CITY-ST-ZIP: DALLAS TX 75204	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

14. To the best of my knowledge, that the information supplied with this report is complete, accurate and current as of the date of filing; that I am authorized to sign this report on behalf of the corporation; that the corporation has complied with all applicable requirements of Florida Statutes; and that my name appears in Block 12 or Block 13 with an address.

SIGNATURE: [signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alan P. Stakem, Secretary

5/24/95

(214) 443-5500

Daytime Phone #

047306 FR

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CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

[illegible] 2:57

TALLAHASSEE, FLORIDA

DOCUMENT # **F94000006663 (8)**

1. Corporate Name

MILLER TIME, INC.

Principal Place of Business	Mailing Address
5290 NW 74TH TERRACE LAUDERHILL FL 33319	5290 NW 74TH TERRACE LAUDERHILL FL 33319

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
12/29/1994	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
[illegible] 24	[illegible] 25
	Zip 29
	Country 30

4. FEI Number: 88-0259504 — ☐ Applied For ☐ Not Applicable

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 was formerly required to pay sales tax under Chapter 212, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MILLER, MURRAY 5290 NW 74TH TERRACE LAUDERHILL FL 33319	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provision 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 [illegible] Title

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	MILLER, SUSAN	12 NAME	
STREET ADDRESS	5290 NW 74TH TERRACE	13 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL 33319	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	MILLER, MURRAY J	22 NAME	
STREET ADDRESS	5290 NW 74TH TERRACE	23 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL 33319	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I/We hereby certify that the information supplied with this filing is true and correct. Each officer and director listed above consents to serve in the capacity indicated. I am aware that false information submitted in a document to the Department of State pursuant to Chapter 607, Florida Statutes, constitutes a felony of the third degree punishable as provided in s. 775.082, s. 775.083, or s. 775.084, Florida Statutes. I am aware that pursuant to s. 607.0128, Florida Statutes, the fees charged by the Department of State for filing documents are nonrefundable, including fees paid for documents rejected or returned unfiled as a result of errors made by the person delivering the document for filing. I hereby 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: M. Murray J. Miller

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Murray J. Miller — Date: 2-13-95 — Daytime Phone #: 305-731-2020

0001637 FP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

DOCUMENT # P94000000439 (7)

1. Corporation Name

HAWKRIDGE HOLDINGS, INC.

Principal Place of Business	Mailing Address
210 SW 119TH AVENUE MIAMI FL 33184	210 SW 119TH AVENUE MIAMI FL 33184

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/04/1994
3a. Date of Last Report: ——
4. FEI Number: 65-1462837 ☐ Applied For ☐ Not Applicable
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

2. Principal Place of Business 21 / Suite, Apt. #, etc. 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address 26 / Suite, Apt. #, etc. 27 / City & State 28 / Zip 29 / Country 30

9. Name and Address of Current Registered Agent

HOOKER, HERMAN
210 SW 119TH AVENUE
MIAMI FL 33184

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.0502, 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	HOOKER, HERMAN
STREET ADDRESS	210 SW 119TH AVENUE
CITY-ST-ZIP	MIAMI FL 33184
TITLE	SD
NAME	HOOKER-QUIROS, HAZEL
STREET ADDRESS	210 SW 119TH AVENUE
CITY-ST-ZIP	MIAMI FL 33184
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (each block: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP; ☐ Change ☐ Addition)

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(1)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Herman Hooker (signature) Herman Hooker 4/30/95 227-3160

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0201366 CP