

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 14, 1999 8:00 am
Secretary of State

05-14-1999 90001 033 ***450.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **L12461**

1. Corporation Name
LICENSE CORP. NO. 1



Principal Place of Business
**2828 CORAL WAY
 MIAMI FL 33145
 US**

Mailing Address
**100 CRESCENT COURT
 STE 1777
 DALLAS TX 75201
 US**

DO NOT WRITE IN THIS SPACE

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

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Dallas, Texas
29 Zip
30 USA

3. Date Incorporated or Qualified
08/30/1989

4. FEI Number
75-2710436

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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
 1200 S. 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 **FL** **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 *Richard McHenry* DATE **4-5-99**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEOP	1.1 TITLE	CEOP
NAME	TICHENOR, MCHENRY T JR	1.2 NAME	TICHENOR, MCHENRY T JR
STREET ADDRESS	100 CRESCENT COURT., STE 1777	1.3 STREET ADDRESS	3102 OAK LAWN AVE., STE 215
CITY-ST-ZIP	DALLAS TX 75201	1.4 CITY-ST-ZIP	DALLAS TX 75219
TITLE	CFOV	2.1 TITLE	CFOV
NAME	HINSON, JEFFREY T	2.2 NAME	HINSON, JEFFREY T
STREET ADDRESS	100 CRESCENT COURT., STE 1777	2.3 STREET ADDRESS	3102 OAK LAWN AVE., STE 215
CITY-ST-ZIP	DALLAS TX 75201	2.4 CITY-ST-ZIP	DALLAS TX 75219
TITLE	COOS	3.1 TITLE	COOS
NAME	LYKES, DAVID D	3.2 NAME	LYKES, DAVID D
STREET ADDRESS	100 CRESCENT COURT., STE 1777	3.3 STREET ADDRESS	3102 OAK LAWN AVE., STE 215
CITY-ST-ZIP	DALLAS TX 75201	3.4 CITY-ST-ZIP	DALLAS TX 75219
TITLE	V	4.1 TITLE	
NAME	DEL CASTILLO, RICARDO	4.2 NAME	
STREET ADDRESS	100 CRESCENT COURT., STE 1777	4.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75201	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	VP
NAME		5.2 NAME	GEROW, DAVID P
STREET ADDRESS		5.3 STREET ADDRESS	3102 OAK LAWN AVE., STE 215
CITY-ST-ZIP		5.4 CITY-ST-ZIP	DALLAS, TX 75219
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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14. 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 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, with all other like empowered.

SIGNATURE: *David Gerow* **DAVID GEROW** DATE: **3/30/99** DAYTIME PHONE #: **(214) 525-1700**

CR2E034 (1/98)