2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M31826

1. Entity Name

PMC INVESTMENT CORPORATION



FILED
Jan 15, 2008 08:00 Al
Secretary of State

Principal Place of Business

17950 PRESTON RD.

Suite 600

DALLAS, TX 75252 US

Mailing Address

17950 PRESTON RD.

SUITE 600

DALLAS, TX 75252 US



01042008

No Chg-P

CR2E034 (11/05)

4. FEI Number

59-2671765

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees U00000785091 01/16/08-80081-011 150.00

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IMBER, BARRY A 17950 PRESTON RD., STE. 600 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, NAT 17950 PRESTON RD., STE. 600 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ROSEMORE, LANCE B. 17950 PRESTON RD., STE. 600 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENBERG, ROY 17950 PRESTON RD., STE. 600 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENBERG, MARTHA R. 17950 PRESTON RD., STE. 600 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUNN, IRV 17950 PRESTON RD., STE. 600 DALLAS, TX 75252
I hereby certify that the information supplied with this filing does not qualify for the exe	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 trestee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/08

972-349-3200

Daytime Phone #