

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

05-28-2002 91520 045 \*\*\*150.00

**DOCUMENT # P03352**

1. Entity Name  
**HOUSTON STAFFORD ELECTRIC, INC.**

|   |   |
|---|---|
| Principal Place of Business<br><b>10203 MULA CIRCLE<br/>STAFFORD TX 77477</b> | Mailing Address<br><b>P.O. BOX 947<br/>STAFFORD TX 77497-0947</b> |
|---|---|

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number **74-1774028**      Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_  
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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| 11. OFFICERS AND DIRECTORS                 |   | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11             |      |
|--|---|---|------|
| TITLE                                      | NAME  | TITLE   | NAME |
| <input type="checkbox"/> Delete            | <b>P<br/>NIX, RICHARD A<br/>1722 LAKEBEND<br/>SUGAR LAND TX 77478</b>               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input checked="" type="checkbox"/> Delete | <b>EVP<br/>MUELLER, BEN L.<br/>1103 MEADOWLARK LANE<br/>SUGAR LAND TX</b>           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input checked="" type="checkbox"/> Delete | <b>EVP<br/>WAGNER, JOHN S<br/>3831 PLEASANT VALLEY<br/>MISSOURI CITY TX</b>         | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input type="checkbox"/> Delete            | <b>VTSC<br/>WILKS, WILLIAM E.<br/>2426 WEATHERFORD DR.<br/>PEARLAND TX 77584</b>    | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input type="checkbox"/> Delete            | <b>VPGM<br/>PASCHAL III, JOHN W.D.<br/>1515 QUIET TRAIL<br/>SUGAR LAND TX 77479</b> | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input checked="" type="checkbox"/> Delete | <b>VPD<br/>POLLOCK, JON<br/>518 PINE SHADOWS<br/>HOUSTON TX 77056</b>               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |

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: *[Signature]*      **4/30/02**      **281 498-2212**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/01)