DOCUMENT # P28942 1. Entity Name. VALUE-ADDED COMMUNICATIONS, INC.						FILED Jun 19, 2000 8:00 a Secretary of State	
Principal Pla	ace of Busine		Mailing Address			05-09-2000 90081 017 ***150.00	
601 N COLL RICHARDSON IS	INS BLVD		1601 N COLLINS BLVD RICHARDSON TX 75080-3520 US				
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.				
						DO NOT WRITE IN THIS SPACE	
City & Sta	ate		City & State			4. FEI Number 36-3617386 Applied For	
Zip Count		Country	Zip Country		, .	5. Certificate of Status Desired 58.75 Additional	
	8. Name	and Address of Current R	egistered Agent		<u></u> <u>_</u>	7. Name and Address of New Registered Agent	
CT-	CORPORAT	ION-SYSTEM			Name CORF	PORATION SERVICE COMPANY	
CT-CO rporation System 1200-S:-Pine-Island-Road Plantation FL-33224		SLAND-ROAD	, .		Street Address (P.O. Box Number is Not Acceptable)		
тоң	MIAIUNTI	L 33324	•		1201	1 HAYS STREET	
The show					City TALL	LAHASSEE FL Zip Code 3230 agent, or both, in the State of Florida.	
Tax tiling r	Signature, typed oration is eliqu	or printed name of registered agent and ble to satisfy its Intangible and elects to do so.	FILE NOW!! After MAY 1, 200	! FEE IS	ll be \$550.00	10. Election Campaign Financing \$5.00 May Be	
).		OFFICERS AND DI	Make Check Payabl		artment of State	e Acced to Fees	
E.	∫ P		UECTOR9	12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
REET ADDRESS	GIBSON, . 1601 NOR RICHARDS	JERRY D ITH COLLINS BOULEVAR	☐ Delete	12. TIFLE NAME STREET A CITY-ST-		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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Attachent 104549

2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P28942 1. Entity Name VALUE-ADDED COMMUNICATIONS. INC. Mailing Address Principal Place of Business 1601 N. Collins Blvd. 1601 N. Collins Blvd. Richardson, TX 75080 Richardson, TX 75080 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite. Apt. #. etc. Applied For 4. FEI Number City & State City & State 36-3617386 Not Applicable \$8,75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Corporation Service Company CT Corporation System Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street 1200 S. Pine Island Road Plantation, FL 33324 Zip Code 3<u>2301</u> Tallahassee ity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Darlene Parker - Vice President (NOTE: Registered Agent signature required when reinstating) FILE(NOWILLEEIS \$150.00) 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be ARTOMAY (L 2000 Rec WIII (to \$55000) Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Rayable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change TITLE President TITI F NAME NAME GIBSON, JERRY D. STREET ADDRESS STREET ADDRES 1601 N. Collins Blvd. Richardson CITY - ST- ZIP CITY - ST- ZIP VP- KERMIT D. HEATON Change X Addition TITLE TITLE VP- LUNDQUIST, GEORGE NAME NAME 1601 N. Collins Blvd. 800 N. Jupiter Rd STREET ADDRESS STREET ADDRESS Richardson, TX 75080 CITY- ST- ZIP Plano, TX 75074 CITY- ST-ZIP Change Addition S -CAMPBELL, E. WAYNE (A)Dollows 14100 San Pedro, SUite 400 TITLE STEPHEN HODGE 1601 N. Collins Blvd. TITLE NAME NAME STREET ADDRESS STREET ADDRESS San Antonio, TX 78232 Richardson, TX 75080 CITY - ST- ZIP CITY - ST- ZIP Addition Delete TITLE TITLE KERMIT D. HEATON NAME NAME 1601 N. Collins Blvd. STREET ADDRESS STREET ADDRESS Richardson, TX 75080 CITY - ST- ZIP CITY- ST- ZIF Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY- ST- ZIP CITY - ST- ZIP Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY - ST- ZIP 13. I hereby certify that the information supplied with this filing does not studify 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)