

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002085

Entity Name: TELEQUIP LABS, INC.

FILED
Jan 08, 2004
Secretary of State

Current Principal Place of Business:

1820 N. GREENVILLE AVE.
RICHARDSON, TX 75081

New Principal Place of Business:

Current Mailing Address:

1820 N. GREENVILLE AVE.
RICHARDSON, TX 75081

New Mailing Address:

FEI Number: 68-0141093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

NATIONAL REGISTERED AGENTS, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

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: TONY ALEXANDER

01/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MEITZNER, PETER
Address: 1820 N. GREENVILLE AVE.
City-St-Zip: RICHARDSON, TX 75081

Title: DS () Delete
Name: WAYNE, JOHNSON
Address: 1820 N. GREENVILLE AVE.
City-St-Zip: RICHARDSON, TX 75081

Title: DT () Delete
Name: SCHOPFER, III, HENRY
Address: 1820 N GREENVILLE AVENUE
City-St-Zip: RICHARDSON, TX 75081

Title: P () Delete
Name: MERIAM, TOM
Address: 1820 N GREENVILLE AVENUE
City-St-Zip: RICHARDSON, TX 75081

Title: D () Delete
Name: LEE, NANCY
Address: 1820 N GREENVILLE AVENUE
City-St-Zip: RICHARDSON, TX 75081

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM MERIAM

P

01/08/2004

Electronic Signature of Signing Officer or Director

Date