

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

Reinstatement

CORPORATION
ANNUAL REPORT.
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 17 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # 816024

(4)

1. Corporation Name

EAST WEST CO.

Principal Place of Business

Mailing Address

% KEN ANDERSON
P.O. BOX 2029
HOUSTON TX 77252

% KEN ANDERSON
P.O. BOX 2029
HOUSTON TX 77252

REINSTATEMENT

3. Date Incorporated or Qualified

03/01/1962

3a. Date of this Report

05/01/1995

4. FEI Number

74-6052366

Applied For

Not Applicable

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

TOWNSEND, KEN
1555 PALM BEACH LAKES BLVD
WEST PALM BEACH FL 33401-2344

10. Name and Address of New Registered Agent

81 Name

Harold Hickman

82 Street Address (P.O. Box Number is Not Acceptable)

3401 W Cypress, Suite 202

83

84 City

Tampa,

FL

85

Zip Code

33607

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 607.1505, Florida Statutes.

SIGNATURE

Signature of principal or registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME CRISP, MAX
STREET ADDRESS 2200 WEST LOOP SOUTH
CITY - ST - ZIP HOUSTON TX

TITLE ☐ DELETE
NAME NOLZ, SUE M.
STREET ADDRESS 2200 WEST LOOP SOUTH
CITY - ST - ZIP HOUSTON TX

TITLE ☐ DELETE
NAME CLEMENTS, GLENN
STREET ADDRESS 2200 WEST LOOP SOUTH
CITY - ST - ZIP HOUSTON TX

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1980 Post Oak Boulevard
1.4 CITY - ST - ZIP Houston, TX 77056

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1980 Post Oak Boulevard
2.4 CITY - ST - ZIP Houston, TX 77056

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 1980 Post Oak Boulevard
3.4 CITY - ST - ZIP Houston, TX 77056

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 900002037189--5
4.4 CITY - ST - ZIP -12/24/96--0111--016
***375.00 ***375.00

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or error attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ken Anderson, Jr.

12/2/96 (713) 625-8029

CR2E034 (3/96)