

0543165



**FILED**  
**Apr 15, 1999 8:00 am**  
**Secretary of State**

04-15-1999 90141 036 \*\*\*158.75

1. Corporation Name  
**MILWHITE, INC.**

7050 PORTWEST DR  
190  
HOUSTON TX 77024  
US

7050 PORTWEST DR  
190  
HOUSTON TX 77024  
US

DO NOT WRITE IN THIS SPACE

02/06/1967

Applied For
Not Applicable

**\$8.75** Additional  
Fee Required

**\$5.00** May Be  
Added to Fees

☐ Yes      ☐ No

10. Name and Address of New Registered Agent

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

83

City

FI	85	Zip Code
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SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

## OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
1.2 NAME	HUGHES, MIKE		
1.3 STREET ADDRESS	13423 JESSICA LANE		
1.4 CITY - ST - ZIP	HOUSTON TX		

2.1 TITLE	PD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			

3.1 TITLE	DC	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			

6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

**SIGNATURE REQUIRED**

3/17/99 713/881-1200

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
MIKE HUGHES/VP-OprS

CR2E034 (11/98)