2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 29, 2001 8:00 am Secretary of State **DOCUMENT # 828907** ABS GROUP INC., A SUBSIDIARY OF ABS GROUP OF COM 01-29-2001 90160 049 ***150.00 Principal Place of Business Mailing Address ONE WORLD TRADE CENTER 915E FLOOR 6855 N CHASE DR HOUSTON TX 77060 **SUITE 9165 NEWYORK NY 10048** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 13-2695912 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE **D**elete TITLE. Change ☐ Addition FILLMORE, JOEL B NAME NAME 16915 MISTY CREEK STREET ADDRESS STREET ADDRESS SPRING TX 77379 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition COOK, REED C NAME NAME 17115 CHESTNUT CREK COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **SPRING TX 77379** CITY-ST-ZIP TITI F TITLE - Change - Addition ☐ Delete BARTON, SARAH M NAME NAME 5100 SAN FELIPE APT 57E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77056** CITY-ST-ZIP CD TITLE ☐ Delete TITI F ☐ Change ☐ Addition IAROSSI, FRANK J NAME NAME 15 WEST TERRACE DRIVE STREET ADDRESS STREET ADDRESS **HOUSTON TX 77007** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F Change ☐ Addition WIERNICKI, CHRISTOPHER J NAME NAME 2 WEST SHAKER CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP THE WOODLANDS TX 77381 CITY-ST-ZIP AS TITLE ☐ Delete TITLE Change ☐ Addition MILLER, THOMAS A NAME NAME

13. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

13107 TRIVET

CYPRESS TX 77429

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CED C. COOK