## 2005 FOR PROFIT CORPORATION

## May 13, 2005 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT #829129** 05-13-2005 90220 035 \*\*\*150.00 1. Entity Name BERGER ENGINEERING, CO. Principal Place of Business Mailing Address 10900 SHADY TRAIL 10900 SHADY TRAIL 50052066 DALLAS, TX 75220 DALLAS, TX 75220 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04222005 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 75-1398690 Not Applicable Zip Country Zip 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE Delete TITLE ☐ Change Addition BERGER, RICHARD L. NAME NAME STREET ADDRESS 10900 SHADY TRAIL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS, TX VP TITLE ☐ Delete TITLE Change ☐ Addition SMITH, TROY R NAME STREET ADDRESS 10900 SHADY TRAIL STREET ADDRESS CITY-ST-ZIP DALLAS, TX CITY+ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition BERGER, SCOTT J NAME NAME STREET ADDRESS 10900 SHADY TRAIL STREET ADDRESS CITY-ST-ZIP DALLAS, TX CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

□ Change

■ Addition

12. 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 10 or Block 11 if changed, or on an attachingnit with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ Delete

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP