	PROFIT RPORATION UAL REPORT 1996		DA DEPARTMENT OF STATE Satidia B. Mortham Secretary of State SION OF CORPORATIONS			
DOCU Corporation	MENT # 8293	32	(6)			
HUM	BLE INCORPORATED					
	e of Business	Mailing Address				PIRAT BIBN 81811 188
	51 392. RM 490 TX 77001-0392	900 BELL ST P.O. BOX 39 HOUSTON TO	2. RM 493			
		HOUSTON TO	x //uu1-us92	3. Date Incorporated or Qualified		
Principal Pr	ace of Business	2a. Mailing Add	ess	01/02/1973 4. FET Number	04/14/	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #	etc	51-0116560		Not Applicable
City & State		27		5. Certificate of Status Desired	□ \$8.º	75 Additional se Required
Zip		Oity & State		Election Campaign Financing     Trust Fund Contribution	<b>□</b> \$5	.00 May Be ded to Fees
Zip	Country 25	Zip [ <b>29</b> ]	Gountry 30	8. This corporation has liability for Florida Statutes	intangible tax under	rs 199.032,
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New F		<del></del>
PLANIA	ation FL 33324		83			
. Pursuant t	o the provisions of Sections 607, 050;	2 and 607.1508, Florida	84 City Statutes, the above named co	poporation submits this statement for the number of	FL I	Zip Code
. Pursuant to or registeri familiar wit	o the provisions of Sections 607.050; ed agent, or both, in the State of Flori th, and accept the obligations of, Sect	tion 607.0505, Florida S	84 City Statutes, the above named co	orporation submits this statement for the pur board of directors. I hereby accept the app	FL I	•
Pursuant to or registeri familiar wit GNATURE	o the provisions of Sections 607,050; ed agent, or both, in the State of Flori h, and accept the obligations of Sections Speaker typed or purish rate of reposite days	tion 607.0805, Florida S tanith face sin	84 City I Statutes, the above named co- authorized by the corporation's statutes.  19918 18-3 months agreement	Experience of the country of the cou	rnose of changing its ointment as register	s registered officed agent. I am
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14. I do hereby certify that the information supplied with this fiting is voluntar ly furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that I am an officer or director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with a Riddress.

SIGNATURE:

Joseph G. Lynch

04/04/96

(713) 656-1807

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