2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

835580

1. Entity Name

VT FINANCE, INC.



FILED Jan 31, 2003 8:00 am Secretary of State 01-31-2003 90090 018 ***150.00

| Principal Place of Business 250 EAST CARPENTER FREEWAY IRVING TX 75062 US 2. Principal Place of Business | | Mailing Address C/O WANDA J. MURKERSON-CITIGROUP 290 EAST CARPENTER FREEWAY H01-20 IRVING TX 75062 US 3. Mailing Address | | | | | | | | | | |
|--|--|--|-----------|---------------|---|---|---|----------------------------------|----------|----------|-------------------|--|
| | | | | | | | | | | | | |
| Súite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | | CHECK HERE IF MAKING CHANGES | | | | | |
| City & Stat | е | City & | State | | | 4. 1 | 4. FEI Number 35-1310812 Applied For Not Applicable | | | | | |
| Zip | Country | Zip Count | | | ry | 5. (| 5. Certificate of Status Desired | | | | litional | |
| Name and Address of Current Registered Agent | | | | | | 7. Name and Address of New Registered Agent | | | | | | |
| C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 | | | | | Name Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| | | | | | | | | | FL | Zip Code | Э | |
| 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 | | | | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State | | | | | | | | ampaign Financi Contribution. | ng 🗆 | | May Be to Fees | |
| 10. | OFFICERS AND I | DIRECTORS 11. | | | | AD | DITIONS/CHANG | ES TO OFFICER | S AND D | IRECTORS | S IN 11 | |
| TITLE ' NAME STREET ADDRESS CITY-ST-ZIP | Delete GUTHRIE, ROY A 50 CARPENTER FREEWAY RVING TX 75062 | | | | | | | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AVAS FREDERICK, MICHAEL J 250 CARPENTER FREEWAY IRVING TX 75062 | IX) Delete | | NAME STREE | STREET ADDRESS 250 | | Greene Greene Denter Freew TX 75062 | ay | <u> </u> | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPS WONG, MARTIN J 250 CARPENTER FREEWAY IRVING TX 75062 | NAM Stre | | | | irving, | 17 13002 | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D COSTAS, STEPHEN J 250 CARPENTER FREEWAY IRVING TX | | ☐ Delete | | | | | | Ē |] Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TV HUGHES, J.F. 250 CARPENTER FWY IRVING TX | | À3 Delete | | | | | | |] Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SLETTEN, MICHAEL W 250 CARPENTER FREEWAY IRVING TX | | ☐ Delete | | | | | | |] Change | Addition | |

I hereby certify that the information supplied with this filing 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 attachment with an address, with all other live empowered.

SIGNATURE:

ASS'T VICE PRESIDENT