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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 849761

(2)

A.E. PET	SCHE COMPANY, INC.	• •						
Principal Place	of Business	Mailing Address				T TO BEAUTY OF THE PROPERTY FOR THE PROPERTY OF THE PROPERTY O	F/8/4 (CUBI) 4000 BION O/A/A	EIRIN ARDA
2112 W. DIVISION 2112 W. DIVISION ARLINGTON TX 76012 ARLINGTON TX 76012-5605								
						3. Date Incorporated or Qualified	3a. Date of Last F	leport
O Deineinal fill	ace of Business	2a. Mailing Address				07/17/1981 4. FEI Number	04/24/1996	
2. Principal Fit	ace of business	26. Walling Address				75-1238083	1 - 1 - 1	oplied For ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.					\$0.7E	Additional
22		27				5. Certificate of Status Desired	Fee R	equired
City & State		City & State				6. Election Campaign Financing		May Be
23 Zip	Country Zip			untry		Trust Fund Contribution		to Fees
24	25 29 30			B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9, Name and Address of Current		1001	Τ		10. Name and Address of New Re		
KLEE	BE, ROBERT W			61	Name			
1650 SAND LAKE DR				82	Street Addre	Iress (P.O. Box Number is Not Acceptable)		
SUITE 209B				83				
ORL	ANDO FL 32809			63				
				84	City		FL 85 Zip	Code
11. Pursuant t office or re agent I ar	u the provisions of Sections 607.0502 eg stered agent, or both, in the State i m familiar with, and accept the obliga	and 607.1508, Florida Statof Florida. Such change wations of, Section 607.0505,	utes, the a s authorize Florida Sta	bove d by tutes	named corporation	oration submits this statement for the poon's board of directors. I hereby accep	urpose of changing i	ts registered registered
SIGNATURE	Signature, typed or printed name of registered agen	to della depolicate de la	NTC - Business	- 4 4 0 0 0	nt nieneh ve zen ive	d when reinstating)	DATE	
12.	OFFICERS AND		13.	o Age	ni signature require	ADDITIONS/CHANGES TO OFFIC		R\$ IN 12
7ITLE	PD			TLE	<u> </u>		☐ Change	Addition
NAME	PETSCHE, ARNOLD E		1.21	1.2 NAME				
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •		1.3 \$	1.3 STREET ADDRESS				
CITY-ST-ZIP				CITY - ST	T-ZIP		[] (han	- Andrian
TITLE			ITLE			Change	L Addition	
NAME STREET ADDRESS	2112 W. DIVISION			2.2 NAME 2.3 STREET ADDRESS				
CHY-ST ZIP	ARLINGTON TX		1	2. 4 City-ST-ZiP				
TOTLE			ITLE			☐ Change	Addition	
NAME	BOSWELL, G THOMAS (ASST)			3.2 NAME				
STREET ADDRESS	2600 FT WORTH NAT BK BLD		3.3 STREET ADDRESS		ADDRESS			
CHY-SI-ZIP TITLE				CITY-S	iT-ZIP		Change	Addition
NAME			NAMÉ			Cualific	L. PROBION	
STREET ADDRESS					ADDRESS			
City-S1-7iP			1	CHTY-SI				
TITLE	DELETE 5.1		5.1 7	TITLE			Change	Addition
NAME			5.21	NAME				
STREET ADDRESS			1		ADDRESS			
CI7Y-SI-ZIP		DELETE		CITY - ST	T-ZIP		Change	Addition
TITLE NAME		f vereit		NAME	Ì		Li Grange	וויייייטאר נייי
STREET ADORESS					ADDRESS			
CITY - ST - ZIF			1	CITY - S	1			
informatio	n indicated on this annual report or si flicer or director of the corporation or n Block 12 or Block 13 if changed, or	applemental annual report in the receiver or trustee emp- on an attachment with an a	s true and owered to iddress.	exec	rate and that ute this report	in Section 119.07(3)(i), Florida Statute my signature shall have the same legal as required by Chapter 607, Florida S	I effect as if made un tatutes; and that my	nder oath; that name

SIGNATURE:

FILED

Apr 28 1997 8:00am

Secretary of State