

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B98000000623

1. Entity Name
EXPRESS SERVICES EMPLOYMENT, L.P.



Principal Place of Business
8516 NW EXPRESSWAY
OKLAHOMA CITY OK 73162

Mailing Address
8516 NW EXPRESSWAY
OKLAHOMA CITY OK 73162

FILED
03 MAY -5 PM 5:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH



2. Principal Place of Business
8516 NW Expressway
Suite, Apt. #, etc.

3. Mailing Address
8516 NW Expressway
Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
Oklahoma City, OK

City & State
Oklahoma City, OK

4. FEI Number 73-1549209

Applied For
Not Applicable

Zip
73162

Country

Zip
73162

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent -

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

DATE

9. Capital Contributions
as Shown on record. \$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # F98000005960
NAME EXPRESS HOLDINGS, INC. IV
STREET ADDRESS 6300 NW EXPRESSWAY
CITY-ST-ZIP OKLAHOMA CITY OK 73132

STREET ADDRESS

CITY-ST-ZIP

800017920788
05/05/03--01002--009 **141.25

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STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Sharon K. Patrick 4-25-03 9058485000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

0020319 MB

CR2E003 (10/02)