2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: 4

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 10, 2002 8:00 am Secretary of State DOCUMENT # F0100000346 1. Entity Name 03-10-2002 90314 001 ***450.00 TALENT TREE OF TEXAS, INC. Mailing Address Principal Place of Business 9703 RICHMOND AVENUE 9703 RICHMOND AVENUE HOUSTON TX 77042 **HOUSTON TX 77042** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State Not Applicable 16-Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent -- - 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. SIGNATURE _ Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to co so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. .TITLE X Delete TITLE P NAME NAME COOK_VINCENT E MEIER, GARRY STREET ADDRESS STREET ADDRESS 9703 RICHMOND AVENUE 9703 RICHMOND AVE CITY-ST-ZIP CITY-ST-7IP **HOUSTON TX 77042** HOUSTON TX 77042 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME PARKER, R. DOUGLAS STREET ADDRESS STREET ADDRESS 9703 RICHMOND AVENUE CITY-ST-ZIP CITY-ST-7IP **HOUSTON TX 77042** Change -☐ Addition -Delete -TITLE: NAME NAME CROCKER, SAMUEL S STREET ADDRESS STREET ADDRESS 9703 RICHMOND AVENUE CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77042** ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered. of the corporation or the receiver or trustee changed, or on an attachment with an add Feb 20, 2002

FILED