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May 03, 2004 8:00 am
Secretary of State
05-03-2004 91241 037 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01000003919

1. Entity Name
SUNBELT GROUP, INC.

Principal Place of Business	Mailing Address
1990 POST OAK BLVD., SUITE 1550 HOUSTON, TX 77056	1990 POST OAK BLVD., SUITE 1550 HOUSTON, TX 77056

04282004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1990 POST OAK BLVD.	1990 POST OAK BLVD.
Suite, Apt. #, etc. SUITE 950	Suite, Apt. #, etc. SUITE 950
City & State HOUSTON, TX	City & State HOUSTON, TX
Zip 77056 Country US	Zip 77056 Country US

4. FEI Number 74-1914048 ☐ Applied For ☐ Not Applicable

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. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEOP EIDMAN, KRAFT G 1990 POST OAK BLVD., SUITE 1550 HOUSTON, TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition 1990 POST OAK BLVD., SUITE 950
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DEVETSKI, GREG J 1990 POST OAK BLVD., SUITE 1550 HOUSTON, TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition 1990 POST OAK BLVD., SUITE 950
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST JENSEN, DIERK 1990 POST OAK BLVD., SUITE 1550 HOUSTON, TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition 1990 POST OAK BLVD., SUITE 950
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DCOB ADENACKER, GERHARD 1990 POST OAK BLVD., SUITE 1550 HOUSTON, TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition 1990 POST OAK BLVD., SUITE 950
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEEL, GLEN 1990 POST OAK BLVD., SUITE 1550 HOUSTON, TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition 1990 POST OAK BLVD., SUITE 950
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SIEGEL, EDWARD M JR. 106 EASTON ROAD WESTPORT, CT 06881	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 like empowered.

SIGNATURE: Greg Devetski VP Comptroller 4/28/04 713-840-0550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #