

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90164 002 ***150.00

DOCUMENT # F02000001739

1. Entity Name
EQK HOLDINGS, INC.



Principal Place of Business
**1800 VALLEY VIEW LANE
DALLAS TX 75234**

Mailing Address
**1800 VALLEY VIEW LANE
DALLAS TX 75234**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **75-2931679**

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	DPT	<input type="checkbox"/> Delete
NAME	KIMBROUGH, RONALD E	
STREET ADDRESS	1800 VALLEY VIEW LANE	
CITY-ST-ZIP	DALLAS TX 75234	
TITLE	DS	<input type="checkbox"/> Delete
NAME	WALDMAN, ROBERT A	
STREET ADDRESS	1800 VALLEY VIEW LANE	
CITY-ST-ZIP	DALLAS TX 75234	
TITLE	V	<input type="checkbox"/> Delete
NAME	BRANIGAN, MARK W	
STREET ADDRESS	1800 VALLEY VIEW LANE	
CITY-ST-ZIP	DALLAS TX 75234	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Louis J. Corna	
STREET ADDRESS	1800 Valley View	
CITY-ST-ZIP	Dallas, TX 75234	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	A. Cal Rossi, Jr.	
STREET ADDRESS	1800 Valley View	
CITY-ST-ZIP	Dallas, TX 75234	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lori L. Burgin	
STREET ADDRESS	1800 Valley View	
CITY-ST-ZIP	Dallas, TX 75234	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dan S. Allied	
STREET ADDRESS	1800 Valley View	
CITY-ST-ZIP	Dallas, TX 75234	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/02)

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert A. Waldman 3-4-03 469-522-4200

Date

Daytime Phone #