

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90350 032 ***150.00

DOCUMENT # F02000002484

1. Entity Name
AEGIS WHOLESALE CORPORATION



Principal Place of Business

**3250 BRIARPARK DR
STE 400
HOUSTON, TX 77042**

Mailing Address

**3250 BRIARPARK DR
STE 400
HOUSTON, TX 77042**

20043213



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number
77-0589888

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|----------------|--------------------------------------|
| TITLE | D |
| NAME | THOMPSON, D. RICHARD |
| STREET ADDRESS | 3250 BRIARPARK DR STE 400 |
| CITY-ST-ZIP | HOUSTON, TX 77042 |
| TITLE | PD |
| NAME | MASSELLA, MICHAEL M |
| STREET ADDRESS | 3250 BRIARPARK DR STE 400 |
| CITY-ST-ZIP | HOUSTON, TX 77042 |
| TITLE | VS |
| NAME | BALOG, MICHAEL C |
| STREET ADDRESS | 3250 BRIARPARK DR ST 400 |
| CITY-ST-ZIP | HOUSTON, TX 77042 |
| TITLE | VTD |
| NAME | MARVIN, STUART D |
| STREET ADDRESS | 3250 BRIARPARK DR STE 400 |
| CITY-ST-ZIP | HOUSTON, TX 77042 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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: Michael C. Balog Michael C. Balog, EVP & Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/05 713-787-0100