


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # F03000006085 1. Entity Name USRP HOLDING CORP.						FILED 04 MAY 17 PM 6:48 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 12240 INWOOD ROAD SUITE 300 DALLAS TX 75244				Mailing Address 12240 INWOOD ROAD SUITE 300 DALLAS TX 75244			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 20-007636				APPLIED FOR		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D STETSON, ROBERT J 12240 INWOOD ROAD SUITE 300 DALLAS TX 75244 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	Harry O. Davis - Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 12240 Inwood Rd. Suite 300 Dallas TX 75244		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILENSKY, RICHARD 12240 INWOOD ROAD SUITE 300 DALLAS TX 75244 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stacy M. Rife - Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 12240 Inwood Rd. Suite 300 Dallas TX 75244		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SIVERLING, VALERIE S 12240 INWOOD ROAD SUITE 300 DALLAS TX 75244 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STRONG, GREGORY I 12240 INWOOD ROAD SUITE 300 DALLAS TX 75244 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	000037302318 <input type="checkbox"/> Change <input type="checkbox"/> Addition 05/25/04--01068--010 **200.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRONG, GREGORY I 600 N. PEARL STREET #1500 DALLAS TX 75201 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: Valerie S. Siverling Valerie S. Siverling, Secretary 4/12/04 972-387-1487 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #							