


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. North Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F92000000185 (0)

1. Corporation Name
CMS CAPITAL VENTURES INC.

Principal Place of Business

~~9820 WILLOW CREEK RD
S440
SAN DIEGO CA 92128
US~~

Mailing Address

~~9820 WILLOW CREEK RD
S440
SAN DIEGO CA 92128
US~~

2. Principal Place of Business

21 **8812 Horizon Blvd**

2a. Mailing Address

26 **8812 Horizon Blvd.**

Suite, Apt. #, etc.

22 **PO Box 10700-87113**

Suite, Apt. #, etc.

27 **PO Box 10700-87113**

City & State

23 **Albuquerque, NM 87113**

City & State

28 **Albuquerque, NM**

Zip

24 **87113**

Country

25 **USA**

Zip

29 **87113**

Country

30 **U.S.A.**

9. 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

3. Date Incorporated or Qualified

11/10/1992

3a. Date of Last Report

03/11/1996

4. FEI Number

51-0319328

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

10. Name and Address of New Registered Agent

31 Name

32 Street Address (P.O. Box Number is Not Acceptable)

33

34 City

FL

35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **ORTENZIO, ROBERT A**
STREET ADDRESS **800 WILSON LANE, BOX 715**
CITY-ST-ZIP **MECHANICSBURG PA**

TITLE **PTD** ☒ DELETE
NAME **PEGLER, WILLIAM L**
STREET ADDRESS **9820 WILLOW CREEK RD S440**
CITY-ST-ZIP **SAN DIEGO CA**

TITLE **SD** ☒ DELETE
NAME **SABAKO, EMILY**
STREET ADDRESS **9820 WILLOW CREEK RD, S440**
CITY-ST-ZIP **SAN DIEGO CA**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **VICE PRESIDENT** ☐ Change ☒ Addition
1.2 NAME **NEAL M. ELLIOTT**
1.3 STREET ADDRESS **8812 Horizon Blvd**
1.4 CITY-ST-ZIP **Albuquerque, NM 87113**

2.1 TITLE **SR.VP, OFO** ☐ Change ☒ Addition
2.2 NAME **ERNEST A. SCHOFIELD**
2.3 STREET ADDRESS **8812 Horizon Blvd**
2.4 CITY-ST-ZIP **Albuquerque, NM 87113**

3.1 TITLE **VP Secretary** ☐ Change ☒ Addition
3.2 NAME **Scot Sauder**
3.3 STREET ADDRESS **8812 Horizon Blvd**
3.4 CITY-ST-ZIP **Albuquerque, NM 87113**

4.1 TITLE **VP-Taxation** ☐ Change ☒ Addition
4.2 NAME **Doug Warrick**
4.3 STREET ADDRESS **8812 Horizon Blvd.**
4.4 CITY-ST-ZIP **Albuquerque, NM 87113**

5.1 TITLE **VP-Finance** ☐ Change ☒ Addition
5.2 NAME **SEAN Dailey**
5.3 STREET ADDRESS **8812 Horizon Blvd.**
5.4 CITY-ST-ZIP **Albuquerque, NM 87113**

6.1 TITLE **SR. VP** ☐ Change ☒ Addition
6.2 NAME **Charles H. Gonzales**
6.3 STREET ADDRESS **8812 Horizon Blvd.**
6.4 CITY-ST-ZIP **Albuquerque, NM 87113**

14. I do 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 annual report or supplemental annual 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 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

ESLAND BLUE RECORDS

8/14/97

CR2E034 (4/97)