

FILE NOW: FILING FEE ~~IS \$550.00~~ IS \$550.00

FILED

Mar 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000003137 (7)

1. Corporation Name

XIEX TELECOMMUNICATIONS, INC.



Principal Place of Business

800 GESSNER
STE. #900
HOUSTON TX 77024
US

Mailing Address

800 GESSNER
STE. #900
HOUSTON TX 77024-4257
US

3. Date Incorporated or Qualified

07/07/1993

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

NOT APPLICABLE

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 of type or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME P
STREET ADDRESS PENTECOST, GARY
CITY-ST-ZIP 800 GESSNER #900
HOUSTON TX

TITLE ☐ DELETE
NAME V
STREET ADDRESS PENTECOST, KYLE
CITY-ST-ZIP 800 GESNER #900
HOUSTON TX 77024

TITLE ☐ DELETE
NAME S
STREET ADDRESS THOMAS, BRETT
CITY-ST-ZIP 800 GESSNER #900
HOUSTON TX

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 ☐ Change ☐ Addition
1.2 NAME P
1.3 STREET ADDRESS T PAT HARRISON
1.4 CITY-ST-ZIP 800 GESSNER
HOUSTON, TX, 77024

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME V
2.3 STREET ADDRESS T PAT HARRISON
2.4 CITY-ST-ZIP 800 GESSNER
HOUSTON, TX, 77024

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME S
3.3 STREET ADDRESS BRETT THOMAS
3.4 CITY-ST-ZIP 800 GESSNER
HOUSTON, TX, 77024

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

34-97 713-932-3340

Date

Daytime Phone #

CR2E034 (9/96)