## 2000 UNIFORM BUSINESS REPORT (UBR)

				<u> </u>						
DOCUMENT # F9400006322  1. Entity Name						FILED				
BETAC CORPORATION						<b>OD</b> JAN 26	AM 10: 0 1			
Principal Place of Business Mailing Address						SECRETAR	y of State Ee, Florida			
2828 N HASKEL		2828 N HASKELL AVE				1ALLAHASS	ICE, PLOHIDA			
FL 10		FL 10 DALLAS TX 75204-2954								
DALLAS TX 752 US	04	US				# 1001140 HIER 10111 0101	I <b>Be</b> rio <b>Be</b> iro <b>Be</b> iro <b>Be</b> iro <b>7</b>		rm (100 i 100)	
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				001	NOT WRITE IN THIS	3 SPACE		
City & State		City & State			<b>4.</b> F	El Number 54-1	1057313	No	plied For	
Zip Country		Zip Country			5. (	Certificate of Status	Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current F	Registered Agent	<b></b>	<u> </u>	7. N	lame and Address	of New Registered	d Agent		
OT 0	ODDODATION CYCTEM			Name						
	ORPORATION SYSTEM S. PINE ISLAND RD	Street Address			ess (P.O. B	ox Number is Not Ad	ceptable)			
	ITATION FL 33324					_				
				City			F	L Zip Code	e	
8. The above	named entity submits this statement for	the purpose of changing its	s register	ed office or reg	gistered ago	ent, or both, in the S	tate of Florida.			
SIGNATURE _	Signature, typed or printed name of registered agent a	nd title if applicable. (NO	TE: Registere	ed Agent signature re	equired when re	instating)	DATE			
9. This corpo	pration is eligible to satisfy its Intangible			IS \$150.00		10. Election Carr	npalan Financina	\$5.0	<b>O</b> May Be	
-	equirement and elects to do so.	After MAY 1, 26 Make Check Paya				Trust Fund C			to Fees	
11.	OFFICERS AND I		12.			L :. DITIONS/CHANGE	S TO OFFICERS AF	ND DIRECTOR:	S IN 11	
TITLE	Р	☐ Delete	TITL					☐ Change	L * · · ···	
name Street address	LOCKWOOD, EARL F  ADDRESS 2001 N. BEAUREGARD ST, SUITE 1100		NAME STREET ADDRESS			7000	<b>90311</b> 3 01/27/00	3767-	5	
CITY-ST-ZIP	ALEXANDRIA VA 22311			'-ST-ZIP		ب- د	;;**1200.00 }***1200.00	011180	10 ' UU - 101	
TITLE	DS	☐ Delete	TITL					☐ Change		
NAME STREET ADDRESS	BLACK, DAVID W 2828 N HASKELL AVE FL 10		NAM STRI	EET ADDRESS						
CITY-ST-ZIP	DALLAS TX 75204		CITY	-ST-ZIP					_	
TITLE	T NAMEY AND MANCY	☐ Delete	TITL NAN					☐ Change		
NAME STREET ADDRESS	VINEYARD, NANCY 3988 N CENTRAL EXPWWY			EET ADDRESS						
CITY-ST-ZIP	DALLAS TX 75204		CITY	'-ST-ZIP				<u> </u>		
TITLE NAME	AS Haney, Hays	☐ Deĭete	TITL					☐ Change	∐	
STREET ADDRESS	2828 N HASKELL AVE FL 10			EET ADDRESS						
CITY-ST-ZIP	DALLAS TX 75204			'-ST-ZIP	-			Channa	<u></u>	
TITLE NAME	D RICH, JEFF	☐ Delete	TITL					Change	L <u>.</u> '	
STREET ADDRESS	2828 N HASKELL AVE FL 10			EET ADDRESS						
CITY-ST-ZIP	DALLAS TX 75204			/-ST-ZIP				Change		
TITLE NAME	d Hortenstine, Henry	☐ Delete	TITL Nan					Change	~O	
STREET ADDRESS	2828 N HASKELL AVE FL 10		STR	EET ADDRESS					21	
CITY-ST-ZIP	DALLAS TX 75204			r-ST-ZIP	- 0 :		Shakaka (f. 1)	المالية	mfayaa a 41	
indicated	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo	true and accurate and that	my signa	iture shall have	the same	legal effect as if mag	de under oath: that	Lam an officer	or airector	
of the cor changed,	poration or the receiver or trustee empo or on an attachment with an address, w	wered to execute this repor ith all other like empowered  • 1	i as requ i.	iled by Chapte	ir GUZ, FIQEI	ua otatules, anu ma	тту паше арреак	J.II BIOCK (TO	CHOOK 12	
SIGNAT		us Monine				1/18/00 21	14-841-619	7		
	SIGNATURE AND TYPED OR PI	INTED NAME OF SIGNING OFFICER		тоя		Date		Daytime Phone #		
	—— nays-nancy, n	19310 cant-occio								