## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 04, 2000 8:00 am Secretary of State DOCUMENT # F9400006669 1. Entity Name APPT HOLDINGS, INC. 04-04-2000 90053 039 \*\*\*150.00 Principal Place of Business Mailing Address 4463 BROOKVIEW 4463 BROOKVIEW **DALLAS TX 75220-6401** DALLAS TX 75220 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 75-2380665 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS Addition CDP ☐ Delete TITLE Change TITLE NAME BROOKS, BETTY L NAME STREET ADDRESS STREET ADDRESS 4463 BROOKVIEW CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75220 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME BROOKS, MELANIE NAME STREET ADDRESS STREET ADDRESS 4463 BROOKVIEW CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75220 Change ☐ Addition TITLE □ Delete TITLE BROOKS, T.E. NAME NAME STREET ADDRESS STREET ADDRESS 4463 BROOKVIEW CITY-ST-7IP CITY-ST-ZIP DALLAS TX 75220 ☐ Addition ☐ Delete TITLE WEST, DEBORAH **BROOKS, DEBORAH** NAME STREET ADDRESS STREET ADDRESS 4463 BROOKVIEW CITY-ST-ZIP CITY-ST-ZIP DALLAS TX ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Al Brooks

VP

3/29/00

214-352-7474

Daytime Phone #