2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 01-16-2007 90264 006 ***158.75 DOCUMENT # F95000003435 PARAMOUNT INSURANCE REPAIR SERVICE, INC. Principal Place of Business Mailing Address 50000371 2418 BLACK GOLD CT 2418 BLACK GOLD CT HOUSTON, TX 77073 US HOUSTON, TX 77073 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 01092007 Chg-P City & State City & State 4. FEI Number Applied For 74-2753546 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and Life if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. VPD TITLE ☐ Delete TITLE ☐ Change ■ Addition KARM, DONALD M NAME NAME 54 RIVA ROW STREET ADDRESS STREET ADDRESS THE WOODLANDS, TX 77380 CITY+ST-7IP CITY-ST-ZIP Delete ☐ Change TITLE ☐ Addition TITLE KARM, DWIGHT 8211 AGISTA PINE PKWY WEST STREET ADDRESS STREET ADDRESS **SPRING, TX 77387** CITY-ST-ZIP CITY-ST-ZIP VPD TITLE ☐ Delete TITLE ☐ Change Addition KARM, WAYLON D NAME NAME STREET ADDRESS 6738 FM 16 STREET ADDRESS CITY-ST-ZIP VAN, TX 75790 CITY-ST-ZIP TITLE ☐ Delete **™** Change Addition IIILE NAME DEATON, CHARLES L NAME 2418 BLACK GOLD CT HOLSTON TX 77073 STREET ADDRESS 1907 WOERNGER STREET ADDRESS CITY-ST-ZIF SPRING, TX 77090 CITY-ST-ZIP TITLE STD ☐ Defete TITLE ☐ Change Addition ABBOTT, WILLIAM D NAME NAME STREET ADDRESS 18700 PALM BEACH BLVD. STREE! AUDRESS CITY-ST-ZIP MONTGOMERY, TX 77356 C(TY-\$1-7)P VPD ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME WARD, ROBERT D SMAN

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

20402 BRIGHTONWOOD

SPRING, TX 77379

STREET ADDRESS

CITY-ST-ZIP

WILLIAM D. ABBOTT TREAS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 16, 2007 8:00 am

800-800-1771

Daytime Phone #

ATTACHMENT STOOUO371

ATTACHMENT TO ANNUAL REPORT
PARAMOUNT INSURANCE REPAIR SERVICE, INC
DOCUMENT # F95000003435

OFFICERS & DIRECTORS

VPD KARM, HILTON 2418 BLACK GOLD COURT HOUSTON, TX 77073

VPD PRICE, TIMOTHY D 141 INDIAN BAYOU DRIVE DESTIN, FL 32541