

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 13 1997 8:00am
Secretary of State

DOCUMENT # F95000003697 (8)

1. Corporation Name

PREFERRED CARRIER SERVICES, INC.

Principal Place of Business

1425 GREENWAY DR., STE 210
IRVING TX 75038

Mailing Address

1425 GREENWAY DR., STE 210
IRVING TX 75038-2454

2. Principal Place of Business

21 500 Grapevine Hwy.

Suite, Apt. #, etc.

22 Suite 300

City & State

23 Hurst, Texas

Zip

24 76054

Country

2a. Mailing Address

26 500 Grapevine Hwy.

Suite, Apt. #, etc.

27 Suite 300

City & State

28 Hurst, Texas

Zip

29 76054

Country

30

3. Date Incorporated or Qualified

08/01/1995

3a. Date of Last Report

04/23/1996

4. FEI Number

75-2571389

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

(NOTE - Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

DCP
THIBODEAUX, JAMIE
1425 GREENWAY DR., STE 210
IRVING TX 75038

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

VST
SMITH, ALAN
1425 GREENWAY DR., STE 210
IRVING TX 75038

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

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TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME 500 Grapevine Highway, Suite 300
1.3 STREET ADDRESS Hurst, Texas 76054
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME 500 Grapevine Highway, Suite 300
2.3 STREET ADDRESS Hurst, Texas 76054
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME CEO
3.3 STREET ADDRESS Nelson Thibodeaux
3.4 CITY-ST-ZIP 500 Grapevine Highway, Suite 300
Hurst, Texas 76054

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

4/30/97

817-281-4387

CR2E034 (9/96)