

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000006051 (5)

1. Corporation Name

NETWORTH OPERATING, INC.



Principal Place of Business

8404 ESTERS BLVD.
IRVING TX 75063

Mailing Address

8404 ESTERS BLVD.
IRVING TX 75063

3. Date Incorporated or Qualified

12/12/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26 20555 SH 249

Suite, Apt. #, etc.

27 MC 110801

City & State

28 Houston, TX

Zip

29 77070

Country

30

4. FEI Number

75-2004896

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 the applicable (NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PCEO ☒ DELETE

NAME MCHALE, JOHN F
STREET ADDRESS 8404 ESTERS BLVD.
CITY-ST-ZIP IRVING TX 75063

TITLE VSDC ☒ DELETE

NAME ZITO, PAUL S
STREET ADDRESS 8404 ESTERS BLVD.
CITY-ST-ZIP IRVING TX 75063

TITLE V ☐ DELETE

NAME STEELE, WILLIAM E JR
STREET ADDRESS 8404 ESTERS BLVD.
CITY-ST-ZIP IRVING TX 75063

TITLE V ☐ DELETE

NAME FELDMAIER, THOMAS
STREET ADDRESS 8404 ESTERS BLVD.
CITY-ST-ZIP IRVING TX 75063

TITLE CTO ☐ DELETE

NAME SCOTT, CRAIG M
STREET ADDRESS 8404 ESTERS BLVD.
CITY-ST-ZIP IRVING TX 75063

TITLE V ☐ DELETE

NAME HAMILTON, JAMES
STREET ADDRESS 8404 ESTERS BLVD.
CITY-ST-ZIP IRVING TX 75063

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96

713-370-0670

Daytime Phone

CR2E034 (12/95)