

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

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000003727 (2)**

1. Corporation Name
COLORTYME, INC.

Principal Place of Business
**1231 GREENWAY, SUITE 800
IRVING TX 75038**

Mailing Address
**1231 GREENWAY, SUITE 800
IRVING TX 75038**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/23/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 75-2651408	Applied For <input type="checkbox"/> Not Applicable
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	Country	28 Zip	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

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

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 607.01(2) 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, type or printed name of registered agent and title if applicable

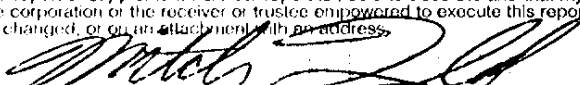
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	D TALLEY, J. EARNEST		1.2 NAME		
STREET ADDRESS	3716 NORMANDAY LANE		1.3 STREET ADDRESS		
CITY- ST- ZIP	DALLAS TX 75205		1.4 CITY- ST- ZIP		
TITLE	D SPEESE, MARK	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	3937 HEARST CASTLE WAY		2.2 NAME		
STREET ADDRESS	PLANO TX 75025		2.3 STREET ADDRESS		
CITY- ST- ZIP			2.4 CITY- ST- ZIP		
TITLE	ST SIMPSON, RANDALL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	808 MEADOW CREEK #2080		3.2 NAME		
STREET ADDRESS	IRVING TX 75038		3.3 STREET ADDRESS		
CITY- ST- ZIP			3.4 CITY- ST- ZIP		
TITLE	PCEO FADEL, MITCH	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	5701 YEARY		4.2 NAME		
STREET ADDRESS	PLANO TX 75093		4.3 STREET ADDRESS		
CITY- ST- ZIP			4.4 CITY- ST- ZIP		
TITLE	VP VALDEZ, GLENN	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	957 GIBBS CROSSING		5.2 NAME		
STREET ADDRESS	COPPELL TX 75019		5.3 STREET ADDRESS		
CITY- ST- ZIP			5.4 CITY- ST- ZIP		
TITLE	VP GIBBONS, PAUL	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	2904 GREEN TREE		6.2 NAME		
STREET ADDRESS	MCKINNEY TX 75070		6.3 STREET ADDRESS		
CITY- ST- ZIP			6.4 CITY- ST- ZIP		

14. I 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:



CR2E034 (10/97)