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FILED
Mar 18 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 # F96000005401 (2)

1. Corporation Name
MAI OF TEXAS, INC.

Principal Place of Business
2445 GATEWAY DRIVE, SUITE 150
IRVING TX 75063

Mailing Address
2445 GATEWAY DRIVE, SUITE 150
IRVING TX 75063

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/16/1986

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 73-1347577 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 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
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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 85 Zip Code
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CDP HERCHMAN, PAUL R 2445 GATEWAY DRIVE, SUITE 150 IRVING TX 75063	1.1 TITLE	D Montgomery, Thomas A. 2445 Gateway Drive, Suite 150 Irving, TX 75063
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D KALLENBERGER, DAVID A MD 2445 GATEWAY DRIVE, SUITE 150 IRVING TX 75063	2.1 TITLE	D LeVecchio, Tony 2445 Gateway Drive, Suite 150 Irving, TX 75063
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V O'BRIEN, KEVIN D SR 2445 GATEWAY DRIVE, SUITE 150 IRVING TX 75063	3.1 TITLE	VP Hill, Gary 2445 Gateway Drive, Suite 150 Irving, TX 75063
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	CFOT WALLACE, MICHAEL G SR 2445 GATEWAY DRIVE, SUITE 150 IRVING TX 75063	4.1 TITLE	D Moreland, Morris 2445 Gateway Drive, Suite 150 Irving, TX 75063
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	S NOVY, MARK 2445 GATEWAY DRIVE, SUITE 150 IRVING TX 75063	5.1 TITLE	D Silcock, Jim 2445 Gateway Drive, Suite 150 Irving, TX 75063
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D PRITZKER, LEON 2445 GATEWAY DRIVE, SUITE 150 IRVING TX 75063	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		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: Mark Novy Mark Novy

CR2E034 (10/97)