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2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F9700000505 1. Entity Name							FILED May 18, 2000 8:00 an Secretary of State		
•		COMPANY, INC.					Secretary 05-18-2000 9033		
Principal Place of Business Mailing Address									
517 SOUTH 16TH ST A PORTÉ TX 77571 US			2 NORTHPOINT DRIVE 300 HOUSTON TX 77060-3234 US				1 (881)/88 21(8 28)11 28111 88111 88111 88111 88111 88111	887H 831H 847H 887H 887H 1881	
2. Principal Pl	ace of Busin	ness	3. Mailing Address	Mailing Address					
222 W.	Las C	olinas Blvd.	222 W. Las Colinas Blvd.			d		. .	
Suite, Apt. 1500	#, etc.		Suite, Apt. #, etc. 1500				DO NOT WRITE IN THI	S SPACE	
City & State Irving, TX			City & State Irving, TX			4. F	76-0323966	Applied For Not Applicable	
Zip		Country	Zip	Coun	try	5. (Certificate of Status Desired	\$8.75 Additional	
75039 - USA			75039 USA		ı	7. Name and Address of New Registered Agent			
	6. Name	and Address of Current F	egistered Agent	******	Name		varie and Address of New Registere	o Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					Street Address (P.O. Box Number is Not Acceptable)				
	ITATION F								
			City			F	Zip Code		
							····		
8. The above	named entit	y submits this statement for	the purpose of changing i	ts registere	ed office or	registered ago	ent, or both, in the State of Florida.	:	
SIGNATURE _	Signature, typed	or printed name of registered agent at	nd title if applicable (NC	OTE. Registere	d Agent signati	re required when re	instating) DATE		
Tax filing re		ible to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			50.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11.		OFFICERS AND (DIRECTORS	12.		AD	DITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 11	
TITLE	DP		Delete	TITL		P		🔀 Change 🗌 Addition	
NAME		WILLIAM E		NAM			F. Shuff	3.1. 3500	
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS - ST-ZIP	222 W. Las Colinas Blvd., Suite 1500 Irving, TX 75039				
TITLE	VST		☐X Delete	TITL	E	VS		🙀 Change 🔲 Addition	
NAME		RT, CHARLES F		NAM			Nanos		
STREET ADDRESS	2 NORTH ON DI COO			ET ADDRESS - ST-ZIP	222 W. Las Colinas Blvd., Suite 1500				
CITY-ST-ZIP		N TX 77060	- TV 6.1.			D Trving	TX 75039	☐ Change 🔀 Addition	
TITLE NAME	VPAS	ITON, DOUGLAS R JR	X Delete	TITL		John M.	Nanos	☐ ourtige [74] yearien	
STREET ADDRESS		POINT DR 300			ET ADDRESS		Las Colinas Blvd., S	Suite 1500	
CITY-ST-ZIP		N TX 77060		CITY	- ST- ZIP	Irving			
TITLE		•	☐ Delete	TITL	Ε			☐ Change ☐ Addition	
NAME	, . E			NAM				ļ	
STREET ADDRESS				■ STRE	ET ADDRESS			,	

CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 intistee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with a fallogue. With all other empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ Delete

Delete

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

· NAME STREET ADDRESS

April 27, 2000

(972) 443-6500

☐ Change

☐ Change

☐ Addition

☐ Addition

Daytime Phone #