

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

FILED
Mar 26 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 # F97000002881 (7)
 1. Corporation Name
OPTIMAL, INC.

Principal Place of Business 5807 ARMOUR DR. HOUSTON TX 77020-8004	Mailing Address 5607 ARMOUR DR. HOUSTON TX 77020-8004
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/02/1997	
21	22	23	24	25	26
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 76-0530053	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	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				10. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	FL	B5

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDC	1.1 TITLE	President (P)
NAME	WALLIS, MARK H	1.2 NAME	Wallis, Mark H.
STREET ADDRESS	3043 WINCHESTER WAY	1.3 STREET ADDRESS	303 Baybridge
CITY-ST-ZIP	SUGAR LAND TX 77479	1.4 CITY-ST-ZIP	Sugarland TX 77478
TITLE	ST	2.1 TITLE	Secretary (S)
NAME	WALLIS, VICTORIA C	2.2 NAME	Wallis, Victoria C.
STREET ADDRESS	3043 WINCHESTER WAY	2.3 STREET ADDRESS	303 Baybridge
CITY-ST-ZIP	SUGAR LAND TX 77479	2.4 CITY-ST-ZIP	Sugar Land TX 77478
TITLE	V	3.1 TITLE	Vice President (V)
NAME	VILLARREAL, JENNIFER D	3.2 NAME	Villarreal, Jennifer W.
STREET ADDRESS	8940 RICHMOND #1019	3.3 STREET ADDRESS	4423 Oak Valley Dr.
CITY-ST-ZIP	HOUSTON TX 77042	3.4 CITY-ST-ZIP	Missouri City TX 77459
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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 H. Wallis* **Mark H. Wallis** 3/16/98 713-675-0550

CR2E034 (10/97)