FILED

∞2082 UNIFORM BUSINESS REPORT (UBR)

Jul 23, 2002 8:00 am F97000005594 DOCUMENT # Secrétary of State 1. Entity Name MARK HAMILTON CONSTRUCTION, INC. 07-23-2002 90326 031 ***550.00 Principal Place of Business Mailing Address 4200 FM 1128 PO BOX 1509 PEARLAND TX 77584 MANVEL TX 77578 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 76-0385780 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee. Bequired. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 .9. Tals corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11:1 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition HAMILTON, MARK NAME NAME STREET ADDRESS 6918 LUM STREET ADDRESS CITY-ST-ZIP MANVEL TX 77578 CITY-ST-ZIP ٧S ☐ Defete TITLE ☐ Change ■ Addition NAME HAMILTON, GAIL NAME STREET ADDRESS 6918 LUM STREET ADDRESS CITY-ST-ZIP MANVEL-TX-77578 CITY-ST-ZIP TITLE ☐ Delete TITLE Vice President Change X Addition NAME NAME -Bill D. Cook STREET ADDRESS STREET ADDRESS 4200 FM 1128 CITY-ST-ZIP CITY-ST-ZIP Pearland: TX 77584 ☐ Delete TITLE TITLE ☐ Change Addition Vice President NAME NAME James E. Burch STREET ADDRESS STREET ADDRESS 4200 FM 1128 CITY-ST-ZIP CITY-ST-ZIP Pearland, TX 77584 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TIT! F ☐ Delete TITI F ☐ Change Addition NAME NAME

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 trustee 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 an address, with all ether like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/02 Date

Daytime Phone #

:R2E034 (4/02)