## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 27, 2000 8:00 am Secretary of State DOCUMENT # F98000000429 PROP CORP. 01-27-2000 90142 002 \*\*\*158.75 Principal Place of Business Mailing Address ATT: TAX DEPT 7030 ARDMORE PO BOX 14484 HOUSTON TX 77054-2302 PERFORMAN HOUSTON TX 77221-4484 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-0827174 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required-7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) **526 EAST PARK AVENUE** TALLAHASSEE FL 32301 Zip Code Fi 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11: 12. PC Change ☐ Addition TITLÉ Delete TITLE DCP NÂME HUCK, RENE NAME HUCK, RENE J. STREET ADDRESS STREET ADDRESS 7030 ARDMORE 7030 ARDMORE STREET CITY-ST-ZIP CITY-ST-ZIP HOUSTON, 77054-2302 HOUSTON TX 77054-2302 Addition ☐ Delete XX Change TITLE STEEN, LIAS J NAME STEEN, LIAS STREET ADDRESS 7030 ARDMORE STREET STREET ADDRESS 7030 ARDMORE STREET CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77054-2302 HOUSTON TX 77054-2302 ☐ Change XX Addition XX Delete TITL F TÎTLE LONGAKER, BRUCE F NAME LAWRENCE A. LUCAS NAME 7030 ARDNORE STREET ADDRESS STREET STREET ADDRESS 7030 ARDMORE STREET CITY-ST-ZIP HOUSTON, 77054-2302 CITY-ST-ZIF HOUSTON TX 77054-2302 Addition XX Delete TITLE ☐ Change TITLE HOLLAND, J. C NAME NAME STREET ADDRESS STREET ADDRESS 7030 ARDMORE STREET CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77054-2302 ☐ Change ☐ Addition TITLE ΑT ☐ Delete TITLE MAYS, THOMAS E NAME NAME STREET ADDRESS STREET ADDRESS 7030 ARDMORE STREET CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77054-2302 ☐ Change Addition ☐ Delete TITLE TITLE 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 other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

THOMAS URE AND THE OF PRINTED ASSISTANT OF SECURING OFFICER OF DIRECTOR

2000 21

749 - 5652

Daytime Phone #