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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F98000003114

TEXAS VIRTUAL SOLUTIONS, INC.

Principal Place of Business											

## **FILED** Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90035 043 \*\*\*150.00



Principal Place	e of Business	Mailing Address				i 2641464 cira tarat sacit antis 6	8111 <b>86</b> 211 88111 8		
1320 GREENWAY DRIVE. SUITE 400 1320 GREENWAY DRIVE. SUITE									
IRVING TX 75038		IRVING TX 75038	IRVING TX 75038			DO NOT WR	ITE IN THIS	SPACE	
					3 D	ate Incorporated or Qualifed			
						5/05/1998			ţ
2 Dringing D	lace of Business	2a. Mailing Address				0/00/1990 El Number		Ar	oblied For
<del></del> 1	lace of business	— ·	<u> </u>					_ <del>                                      </del>	ot Applicable
Suite, Apt.	# atc	Suite, Apt. #, etc.				5-2508909			Additional
	#, etc.				5. C	ertifcate of Status Desired			equired
22 City & Stat		City & State	City & State			lection Campaign Financing		\$5.00	May Be
<del></del>	<b>-</b>	28	<b>⊢</b> ′			rust Fund Contribution		•	to Fees
<b>23</b> } Zip	Country	Zip					rrent vear Inta		
24	25	·	30	•		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No			
24}	9. Name and Address of Curre					lame and Address of New	Registered /	Agent	
			81	Name	)		· · · · · · · · · · · · · · · · · · ·		
СТ	CORPORATION SYSTEM		_						
	SOUTH PINE ISLAND ROAD		82	82 Street Address (P.O. Box Number is Not Acceptable)			table)	100	
	NTATION FL 33324		83				. 3.1.	1 1	
								fo	**;
			84	City			FL	85 Zip	Code
44 0	to the provisions of Sections 607.050	22 and 607 1508 Florida Statute	s the abov	o-named	d corporation s	uhmits this statement for the	e numose of	 changing its	registered
office or r	enistered agent or both in the State	of Florida. Such change was au	Jinonzed by	/ the corp	poration's boar	d of directors. I hereby acce	ept the appoir	ntment as re	gistered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statute	S.					
SIGNATURE					required when rains	etation)	DATE		
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	ent signature		DITIONS/CHANGES TO O		D DIRECTO	ORS IN 12
		D DIRECTORS SELETE	1.1 TITLE					Change	Addition
TITLE	PCEO	DE OLLEGE	1.2 NAME		BALEWIN	MICHAEL R			_
NAME BALDWIN, MICHAEL R					13227	BERWARDE, SU	FE LICO		ł
STREET ADDRESS	1320 GREENWAY DRIVE, SUIT	E 400		T ADDRESS		75034			- 1
CITY-ST-ZIP	IRVING TX 75038	DELETE	1.4 CITY-1	SI-ZIP	1150 500	12021		☐ Change	☐ Addition
TITLE	EVD	- DELCTE	2.1 TITLE						
NAME	HICKS, J D		2.2 NAME						
STREET ADDRESS	1320 GREENWAY DRIVE, SUIT	E 400		ET ADDRESS				-	-
CITY-ST-ZIP	IRVING TX 75038	OZ prieze	2. 4 CITY-	ST-ZIP				Change	Addition
TITLE	V	<b>▼</b> DELETE	3.1 TITLE					unange	
NAME	FARMER, DAVID		3.2 NAME						
STREET ADDRESS	1320 GREENWAY DRIVE, SUIT	E 400	3.3 STREE	ET ADDRESS	S				
CITY-ST-ZIP	IRVING TX 75038		3.4. CITY-	ST-ZIP					
TITLE	<b>V</b>	DELETE	4.1 TITLE		1			☐ Change	☐ Addition
NAME	CALVERLEY, MERVIN		4. 2 NAME	•					
STREET ADDRESS	1320 GREENWAY DRIVE, SUIT	E 400	4.3 STREE	ET ADDRESS	s				ļ
CITY-ST-ZIP	IRVING TX 75038		4.4 CITY-	ST-ZIP					
TITLE	DST	DELETE	5.1 TYTLE		CFO/C			Change	Addition
NAME	MARSHALL, KENNETH W		5.2 NAME		MARSH	the IKENNEM W. Greenway DR, S			
STREET ADDRESS	1320 GREENWAY DRIVE, SUIT	E 400	5.3 STREE	ET ADDRESS			MILE A	14	
CITY-ST-ZIP	IRVING TX 75038		54 CITY-	ST-ZIP		TX 75039			
TITLE	D	DELETE	6.1 TITLE			- , <del></del>		Change	Addition
NAME	PALOMINO, LEONARD		6.2 NAME						
STREET ADDRESS		F 400	6.3 STREI	ET ADDRESS	s				
CITY-ST-ZIP	IRVING TX 75038		6.4 CITY-	ST-ZIP	1				

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, with all other like propowered.

SIGNATURE: