2001 UNIFORM BUSINESS REPORT (UBR)

May 02, 2001 8:00 am Secretary of State DOCUMENT # F98000003851 1. Entity Name PWMB, INC. 05-02-2001 90063 029 ***150.00 Mailing Address Principal Place of Business 1950 STEMMONS FREEWAY, STE 6001 1950 Stemmons Freeway, STE 6001 DALLAS TX 75207 DALLAS TX 75207 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number 75-2736541 City & State Not Applicable \$8.75 Additional Country Zip Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (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 After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS President PCD TITLE Delete TITLE waggoner Fruy #6001 BENTLEY, LESLIE V NAME NAME 1950 STEMMON'S FREEWAY, STE 6001 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX TITLE TITLE JONES, LAWRENCE S NAME NAME 1950 STEMMONS FREEWAY, STE 6001 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX TITLE TITLE HOUSTON, BEVERLY M NAME NAME 1950 STEMMON'S FREEWAY, STE 6001 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP. DALLAS TX ☐ Addition ☐ Delete TITLE TITLE NAME NAME ----STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET 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 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.

CICNATURE, WAR MAN

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01

214) 863-1099