2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2005 8:00 am Secretary of State **DOCUMENT # F98000003851** 05-03-2005 90170 028 ***150.00 1. Entity Name PWMB, INC. Principal Place of Business Mailing Address たいいさいいにつ 1950 STEMMONS FREEWAY, STE 6001 1950 STEMMONS FREEWAY, STE 6001 DALLAS, TX 75207 DALLAS, TX 75207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272005 Chq-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 75-2736541 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ■ Addition WAGGONER, JEFF NAME NAME STREET ADDRESS 1950 STEMMONS FREEWAY, STE 6001 STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75207 CITY-ST-ZIP SVP IT reusurer Addition TITLE Delete TITLE HENDRICK, JUDY Michael High Fruy # 6001 NAME NAME STREET ADDRESS 1950 STEMMONS FREEWAY, STE 6001 STREET ADDRESS CITY-ST-7IP **DALLAS, TX 75207** CITY-ST-7IP TITLE ☐ Delete Change ☐ Addition TITLE NAME LITTON, VICKIE NAME 1950 STEMMONS FREEWAY, STE 6001 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75207 CITY-ST-ZIP Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

FILED