

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

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90023 040 ***150.00

DOCUMENT # F98000005357

1. Corporation Name
FOXJET, INC.

Principal Place of Business
2016 E. RANDOL MILL RD #409
ARLINGTON TX 76011

Mailing Address
2016 E. RANDOL MILL RD #409
ARLINGTON TX 76011

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/24/1998

4. FEI Number
75-2333395

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☒ Addition

TITLE PC
NAME FOX, RICHARD
STREET ADDRESS 2016 E. RANDOL MILL RD #409
CITY-ST-ZIP ARLINGTON TX 76011

1.1 TITLE D
1.2 NAME NATHANIEL C. BRINN
1.3 STREET ADDRESS 7 ST. ANDREWS DRIVE
1.4 CITY-ST-ZIP AVON, CT 06001

TITLE AS
NAME DARLING, DEBBIE
STREET ADDRESS 2016 E. RANDOL MILL RD #409
CITY-ST-ZIP ARLINGTON TX 76011

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ST
NAME HALE, MICHAEL
STREET ADDRESS 2016 E. RANDOL MILL RD #409
CITY-ST-ZIP ARLINGTON TX 76011

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D
NAME MCLAURY, EDWIN P
STREET ADDRESS 1 DARLING DR.
CITY-ST-ZIP AVON CT 06001

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME DOBBS, WILLIAM G
STREET ADDRESS 6201 E. 43RD ST.
CITY-ST-ZIP TULSA OK 74135

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME TOWNSEND, STANLEY
STREET ADDRESS 6201 E. 43RD ST
CITY-ST-ZIP TULSA OK 74135

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 empowered.

SIGNATURE: *Michael Hale* MICHAEL HALE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/99

Date

817 795 6056

Daytime Phone #

CR2E034 (11/98)

0558675