


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 11, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # F99000000224 |  |
| 1. Entity Name SUH, INC. | |

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| Principal Place of Business 6363 WOODWAY SUITE 1000 HOUSTON, TX 77057-1757 | Mailing Address 6363 WOODWAY SUITE 1000 HOUSTON, TX 77057-1757 |
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06292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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|-----------------------------|--|
| 4. FEI Number 76-0547454 | Applied For <input type="checkbox"/> Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 |
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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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CVD DINERSTEIN, T.H. 6363 WOODWAY SUITE 1000 HOUSTON, TX 770571757 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CEOD DINERSTEIN, JACK 6363 WOODWAY SUITE 1000 HOUSTON, TX 770571757 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | COSD CALTAGIRONE, VINCENT T III 6363 WOODWAY SUITE 1000 HOUSTON, TX 770571757 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CFOT HUSMANN, RANDALL 6363 WOODWAY SUITE 1000 HOUSTON, TX 770571757 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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07/11/05-80020-004 550.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: Randall Husmann CFO 6/30/2005 713.570.0312
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

RANDALL HUSMANN, CHIEF FINANCIAL OFFICER