2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

FILED May 16, 2000 8:00 am Secretary of State DOCUMENT # F9900001046 OWC ACQUISITION CORPORATION 01-29-2000 90018 024 ***158.75 Mailing Address Principal Place of Business 2711 LBJ FREEWAY. STE 200 2711 LRJ FREEWAY, STE 200 DALLAS TX 75234-7318 DALLAS TX 75234 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 75-2799040 Not Applicable \$8.75 Additional Zip Country Zio Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition Delete TITLE TITLE NAME SHAW, WILLIAM J NAME STREET ADDRESS 4623 PINEVALLEY DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FRISCO TX ☐ Addition Change VSD Delete TITLE TITLE JACCARD, WALTER B NAME STREET ADDRESS 106 TENTH STREET SOUTH STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP KIRKLAND WA ☐ Change Addition VASD ☐ Delete TITLE HENDRYCY, KENNETH E NAME NÀME STREET ADDRESS 5665 ARAPAHO RD., #1221 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DALLAS TX ☐ Change ☐ Addition Delete TITLE TITLE MCCRUM, DAVID A NAME NAME STREET ADDRESS 8015 N. MACARTHUR BLVD., #2060 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IRVING TX Delete ☐ Change ☐ Addition TITLE REED, BRYAN NAME 2903 CHAMPLIN COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RICHARDSON TX ☐ Change Addition ☐ Delete TITLE TITLE GELINAS, R G NAME NAME STREET ACCRESS 4907 CAPE CORAL DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 13. Thereby 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 trusted 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. SIGNATURE:

OFFICER OR DIRECTO

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