2005 FOR PROFIT CORPORATION

May 11, 2005 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # F99000003589 05-11-2005 90129 048 ***150.00 1. Entity Name NELSON ARCHITECTURAL ENGINEERS, INC. Mailing Address Principal Place of Business 50051789 3303 LEE PARKWAY, STE 440 3303 LEE PARKWAY, STE 440 DALLAS, TX 75219-5116 DALLAS, TX 75219-5116 2. Principal Place of Business 3. Mailing Address 2740 Dallas Pkwy Suite, Apt. #. etc. 2740 Palllas Pkwy 03192005 Chg-P CR2E034 (10/03) Suite 220 Suite 220 4. FEI Number City & State Applied For 75-2780153 Not Applicable Plano. <u>Plano, TX</u> Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 75093 75093 USA USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 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 \Box Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Ki Change ☐ Addition P NELSON, ERIK L NAME NAME Nelson, Erik L. STREET ADDRESS 3303 LEE PKWY, STE 440 STREET ADDRESS 2740 Dallas Pkwy., Suite 220 CITY-ST-ZIP DALLAS, TX 752195116 CITY-ST-ZIP Plano, TX 75093 TITLE Delete TiTLE Change Addition AHUJA, DEEPAK NAME NAME Ahuja, Deepak STREET ADDRESS 3303 LEE PKWY, STE 440 STREET ADDRESS 2740 Dallas Pkwy., Suite 220 CITY-ST-7IP DALLAS, TX 752195116 CITY-ST-7IP Plano, TX 75093 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D ECTOR Deepak Ahuja

(469) 429-9000

Date

FILED