## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address,

on all other

## FILED Apr 17, 2000 8:00 am Secretary of State DOCUMENT # **F99000003820** 1. Entity Name UNITED GROUP SERVICE CENTERS, INC. 04-17-2000 90080 004 \*\*\*150.00 Mailing Address Principal Place of Business 2121 PRECINCT LINE ROAD 2121 PRECINCT LINE ROAD HURST TX 76064-3136 HURST TX 76064 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 75-2270295 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) \* Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. √ Addition TITLE TITLE Delete Jeffrey Jensen NAME NAME JENSEN, RONALD L 2121 Precinct Line Rd STREET ADDRESS STREET ADDRESS 2121 PRECINCT LINE ROAD Hurst, TX 76054 CITY-ST-ZIP CITY-ST-ZIP **HURST TX** Addition ☐ Change Delete TITLE TITLE Ralph Wolfe JENSEN, JEFFREY NAME NAME 2121 Precinct Line Rd STREET ADDRESS STREET ADDRESS 2121 PRECINCT LINE ROAD ... Hurst, TX 76054 -CITY-ST-ZIP CITY-ST-ZIP **HURST TX** Addition ☐ Change ☐ Delete TITLE TITLE PAGEL, CINDY D NAME NAME STREET ADDRESS STREET ADDRESS 2121 PRECINCT LINE ROAD CITY-ST-ZIP CITY-ST-ZIP **HURST TX** ☐ Change Addition ☐ Delete TITLE TITLE NAME FRIEDMAN, GARY NAME 2121 PRECINCT LINE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HURST TX** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Cindy D. Pagel 4/3/00 817-428-3893 SIGNATURE: Daytime Phone # RATED NAME OF SIGNING OFFICER OR DIRECTOR Date