

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # F99000004229		
1. Entity Name UNION BEACON GRAPHICS, INC.		
Principal Place of Business 7550 W 2ND CT HIALEAH, FL 33014	Mailing Address 7550 W 2ND CT HIALEAH, FL 33014	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		DO NOT WRITE IN THIS SPACE
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: typewritten or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retreating.) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		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	PTD HYDE, JERRY L 2500 W LOOP S # 500 HOUSTON, TX 77027	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NORTON, CARL L 2500 W LOOP S # 500 HOUSTON, TX 77027	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 807, 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: <u>Jerry L. Hyde [Jerry L. Hyde]</u> <u>April 19, 2006</u> <u>713 961-4700</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		



02222006 No Chg-P CR2E034 (11/05)

4. FEI Number
78-0611187Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required000000527985
05/05/06-80019-003 150.00

**DO NOT WRITE
IN THIS SPACE**