2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Jan 29, 2001 8:00 am Secretary of State **DOCUMENT # G04033** 1. Entity Name CAMBAS INVESTMENTS, INC. 01-29-2001 90115 044 ***150.00 Principal Place of Business Mailing Address ONE RIVERWAY SUITE 500. ONE RIVERWAY STE 500 HOUSTON TX 77056 HOUSTON TX 77056-1921 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-2887497 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City FL 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** (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 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. Change Addition ☐ Delete TITLE TITLE CAMBAS, NICHOLAS A JR NAME NAME STREET ADDRESS 2045 LAWSON RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 34623 DVS ☐ Defete TITLE Addition TITLE LONGO, ROBERT E NAME NAME STREET ADDRESS 1 RIVERWAY STE 500 STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77056** CITY-ST-ZIP Change ☐ Addition DCEO ☐ Delete TITLE TITLE NAME GALLAGHER, FRANK NAME STREET ADDRESS STREET ADDRESS 1 RIVERWAY STE 500 CITY-ST-7/P CITY-ST-ZIP **HOUSTON TX 77056** ACS Change ☐ Addition TITLE 🖊 Delete TITLE SANCHEZ, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 1 RIVERWAY STE 500 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77056** Change 🖬 Addition Delete DIDE TITLE UPHAM, GREGORY NAME NAME STREET ADDRESS STREET ADDRESS 1 RIVERWAY STE 500 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77056** Change D ☐ Addition ☐ Delete TITLE TITLE **BURTWISTLE, LINDA** NAME NAME STREET ADDRESS STREET ADDRESS 1 RIVERWAY STE 500 CITY-ST-ZIP CITY-ST-7IP **HOUSTON TX 77056** 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

FILED