

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G72267 (9)

1. Corporation Name  
JALCO INC. OF TEXAS

Principal Place of Business

% CT CORPORATION SYSTEM  
8751 WEST BROWARD BLVD  
PLANTATION FL 33324

Mailing Address

PO BOX 27368  
HOUSTON TX 77227-7368  
US



2. Principal Place of Business  
21 5148 Lotus St.  
Suite, Apt. #, etc.  
22 City & State  
23 Houston Texas  
Zip Country  
24 77045 25 Harris  
26 P. O. Box 27368  
Suite, Apt. #, etc.  
27 City & State  
28 Houston, Texas  
Zip Country  
29 77227 30 Harris

3. Date Incorporated or Qualified 12/05/1983  
3a. Date of Last Report 01/31/1996  
4. FEI Number 74-1148952  
Applied For Not Applicable  
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS |                     | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|---------------------|---|--|
| TITLE                      | DP                  | 1.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | GEORGE, LORRAINE M. | 1.2 NAME  |  |
| STREET ADDRESS             | 5148 LOTUS STREET   | 1.3 STREET ADDRESS                                    |  |
| CITY - ST - ZIP            | HOUSTON TX          | 1.4 CITY - ST - ZIP                                   |  |
| TITLE                      | DVP                 | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | MANESS, ROY C.      | 2.2 NAME  |  |
| STREET ADDRESS             | 5148 LOTUS STREET   | 2.3 STREET ADDRESS                                    |  |
| CITY - ST - ZIP            | HOUSTON TX          | 2.4 CITY - ST - ZIP                                   |  |
| TITLE                      | T                   | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | DODD, F.P. J        | 3.2 NAME  |  |
| STREET ADDRESS             | 5148 LOTUS STREET   | 3.3 STREET ADDRESS                                    |  |
| CITY - ST - ZIP            | HOUSTON TX          | 3.4 CITY - ST - ZIP                                   |  |
| TITLE                      | CEO                 | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | GEORGE, LEE D.      | 4.2 NAME  |  |
| STREET ADDRESS             | 5148 LOTUS STREET   | 4.3 STREET ADDRESS                                    |  |
| CITY - ST - ZIP            | HOUSTON TX          | 4.4 CITY - ST - ZIP                                   |  |
| TITLE                      | S                   | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | CRUZ, NILO          | 5.2 NAME  |  |
| STREET ADDRESS             | 5148 LOTUS STREET   | 5.3 STREET ADDRESS                                    |  |
| CITY - ST - ZIP            | HOUSTON TX          | 5.4 CITY - ST - ZIP                                   |  |
| TITLE                      |                     | 6.1 TITLE   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       |                     | 6.2 NAME  | Vice President   |
| STREET ADDRESS             |                     | 6.3 STREET ADDRESS                                    | JACK DENINA  |
| CITY - ST - ZIP            |                     | 6.4 CITY - ST - ZIP                                   | 5148 Lotus St.<br>Houston, Texas 77045                                       |

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)