

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 PM 2:22

DOCUMENT # **J83328** (1)

1. Corporation Name
PROPIER INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

C/O INTERSHOP MANAGEMENT
5430 LBJ FRWY, SUITE 850
DALLAS TX 75240

C/O INTERSHOP MANAGEMENT
5430 LBJ FRWY, SUITE 850
DALLAS TX 75240

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **07/20/1987** 3a. Date of Last Report **02/16/1994**

4. FEI Number **58-1743871** 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

2. Principal Place of Business
21 **13455 NOEL ROAD**

2a. Mailing Address
26 **13455 NOEL ROAD**

Suite, Apt. #, etc.
22 **SUITE 1100**

Suite, Apt. #, etc.
27 **SUITE 1100**

City & State
23 **DALLAS TEXAS**

City & State
28 **DALLAS TEXAS**

Zip Country
24 **75240 USA**

Zip Country
29 **75240 USA**

30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP**
NAME **RODER, HEINZ**
STREET ADDRESS **P. O. BOX 281, 2087**
CITY ST ZIP **ZURICH, SWITZERLAND**

11 TITLE **VICE PRES. / DIRECTOR** Change Addition
12 NAME **RODER, HEINZ**
13 STREET ADDRESS **P.O. BOX 281, 2087 n/a**
14 CITY ST ZIP **ZURICH, SWITZERLAND**

TITLE **T**
NAME **PAT PRIEST**
STREET ADDRESS **5430 LBJ FRWY, STE 850**
CITY ST ZIP **DALLAS TX**

21 TITLE **VICE PRES./SECRETARY/TREAS.** Change Addition
22 NAME **PRIEST, PAT**
23 STREET ADDRESS **13455 NOEL ROAD, SUITE 1100**
24 CITY ST ZIP **DALLAS, TEXAS 75240**

TITLE **DVS**
NAME **KAUFMANN, JOSEPH A.**
STREET ADDRESS **P. O. BOX 281, 2087**
CITY ST ZIP **ZURICH, SWITZERLAND**

31 TITLE **PRESIDENT / DIRECTOR** Change Addition
32 NAME **KAUFMANN, JOSEF A.**
33 STREET ADDRESS **P.O. BOX 281, 2087 n/a**
34 CITY ST ZIP **ZURICH, SWITZERLAND**

TITLE **VP**
NAME **HERBERT MICHEL**
STREET ADDRESS **5430 LBJ FRWY, STE 850**
CITY ST ZIP **DALLAS TX**

41 TITLE **VICE PRESIDENT** Change Addition
42 NAME **MICHEL, HERBERT**
43 STREET ADDRESS **P.O. BOX 281, 2087 n/a**
44 CITY ST ZIP **ZURICH, SWITZERLAND**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE **VICE PRES./ASST. SECRETARY** Change Addition
52 NAME **PFISTER, EDITH**
53 STREET ADDRESS **P.O. BOX 281, 2087 n/a**
54 CITY ST ZIP **ZURICH, SWITZERLAND**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included 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 807, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an addition turned with an address.

SIGNATURE: *Pat Priest* **PAT PRIEST, VICE PRESIDENT** 4-18-95 214-774-4100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Type in Month & Day)