2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L11552 Aug 10, 2000 8:00 am Secretary of State 1. Entity Name CARNICON HOLDINGS CORP. 06-23-2000 90106 043 ***150.00 Principal Place of Business Mailing Address 08-10-2000 90001 018 ***400.00 1950 STEMMONS FREEWAY 1950 STEMMONS FREEWAY SUITE 6001 SUITE 6001 DALLAS TX 75207-3107 DALLAS TX 75207 2. Principal Place of Business 3. Mailing Address above as Samp Same Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 11 Applied For City & State 4. FEI Number City & State 65-0158388 41 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PFLTZ. ARVIN Street Address (P.O. Box Number is Not Acceptable) 3250 MARY ST., STE 500 MIAMI FL 33133-4997 Zip Code City 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 epolicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 мау Ве 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 ☐ Change CEO Delete TITLE TITLE MALIE NAME CARREKER, JAMES D STREET ADDRESS STREET ADDRESS 1950 STEMMONS FREEWAY, #6001 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75207 Prosident Addition TITLE Delete TITLE Michael A. Grossman NAME BENTLEY, DESLIE V NAME STREET ADDRESS 1950 STEMMONS FREEWAY, #6001 STREET ADORESS same-les - about CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75207 VP +T reasuren Delate TITLE TITLE NAME JONES, LAWRENCE S NAME Makoney 1950 STEMMON'S FREEWAY, #6001 _ _ STREET ADDRESS STREET ADDRESS 03 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75207 Change Addition Delete TITLE NAME MORELAND, CARLA S NAME STREET ADDRESS STREET ADDRESS 1950 STEMMONS FREEWAY, #6001 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75207 TITLE Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition THE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 of 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. SIGNATURE: