## **2006 FOR PROFIT CORPORATION** ANNUAL REPORT (AR)

indicated on this report or supplemental report the corporation or the receiver or trustage if changed, or on an attachment with an ad

SIGNATURE: \_

## May 08, 2006 8:00 am Secretary of State DOCUMENT # P05866 1. Entity Name 05-08-2006 90285 038 \*\*\*150.00 MINCRON SBC CORPORATION Principal Place of Business Mailing Address 333 N. SAM HOUSTON PARKWAY EAST, #110 333 N. SAM HOUSTON PARKWAY EAST, #11d HOUSTON TX 77060-2403 HOUSTON TX 77060-2403 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 13-2981437 Not Applicable Zin Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent "C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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. I am familiar with, and accept the obligations of registered agents .SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 Delete Change Addition President NAME ULRICH, WALTER NAME Read Boles STREET ADDRESS 3811 ABBEYWOOD DR STREET ADDRESS 333 N. Sam Houston Pkwy. E. #1100 CITY-ST-ZIP PEARLAND TX 77584 CITY-ST-ZIP Houston, TX 77060 Change BILLE ☐ Delete TITLE ☐ Addition BERGER, GWENDOLYN NAME NAME STREET ADDRESS 17802 MANTANA STREET ADDRESS CITY-ST-ZIP SPRING TX CITY - ST- 7IP Delete ☐ Change ☐ Addition NAME CALLIER, JIM NAME STREET ADDRESS 950 ECHO LANE, STE 335 STREET ADDRESS CITY-ST-ZIP CITY-ST-2/P **HOUSTON TX 77024** D TITLE Delete TITLE Change Addition NAME BOLES, READ NAME STREET ADDRESS 8841 KNIGHT STREET ADDRESS CITY-ST-ZIP HOUSTON TX 77054 CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information suppl exemptions contained in Section 119, Florida Statutes. I further certify that the information

**FILED** 

re shall have the same legal effect as if made under oath; that I am an officer or director ed by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11