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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # OKLAHOMA INSTALLATION COMPANY

(9)

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 9220 N. GARNETT RD., SUITE G 9220 N. GARNETT RD., SUITE G P.O. BOX 740 OWASSO OK 74055 P.O. BOX 740 **OWASSO OK 74055** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/18/1987 Applied For 2. Principal Place of Business 2s. Mailing Address 4. FEI Number 73-1301981 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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 re-instating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE 1 1 TITLE BIGELOW, JAMES D NAME 1.2 NAME 8622 S 78TH E. AVE STREET ADDRESS 1.3 STREET ADDRESS TULSA OK CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition 2.1 TITLE TITLE WOOD, WILLIAM D NAME 2.2 NAME 3916 S 132 E AVE STREET ADDRESS 2.3 STREET ADDRESS TULSA OK CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST-ZIP Change DELFTE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. 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 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 change I, or or an attachment with an address.

SIGNATURE: