

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P17886 (3)

1. Corporation Name

UNIVERSAL COMPUTER SYSTEMS, INC.



Principal Place of Business

6700 HOLLISTER
HOUSTON TX 77040

Mailing Address

6700 HOLLISTER
HOUSTON TX 77040

3. Date Incorporated or Qualified

02/01/1988

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

76-0213541

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

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

Signature typed or printed (Name of registered agent and the corporation)

(If the Registered Agent signature is required when filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	BROCKMAN, ROBERT T.	
STREET ADDRESS	6700 HOLLISTER	
CITY-ST-ZIP	HOUSTON TX	
TITLE	V	☐ DELETE
NAME	NALLEY, ROBERT M.	
STREET ADDRESS	6700 HOLLISTER	
CITY-ST-ZIP	HOUSTON TX	
TITLE	SVD	☒ DELETE
NAME	JONES, DON D.	
STREET ADDRESS	6700 HOLLISTER	
CITY-ST-ZIP	HOUSTON TX	
TITLE	V	☐ DELETE
NAME	COOPER, CARLAN	
STREET ADDRESS	6700 HOLLISTER	
CITY-ST-ZIP	HOUSTON TX	
TITLE	AS	☐ DELETE
NAME	BIGGS, TWYLA J	
STREET ADDRESS	6700 HOLLISTER	
CITY-ST-ZIP	HOUSTON TX	
TITLE	D	☐ DELETE
NAME	THORPE, ALFRED J.	
STREET ADDRESS	2700 POST OAK BLVD 1750	
CITY-ST-ZIP	HOUSTON TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	☐ Change ☒ Addition
10. NAME	SECRETARY
11. STREET ADDRESS	BUNNEY, KENNETH E.
12. CITY-ST-ZIP	6700 HOLLISTER
13. CITY-ST-ZIP	HOUSTON, TX 77040
14. TITLE	☐ Change ☐ Addition
15. NAME	
16. STREET ADDRESS	
17. CITY-ST-ZIP	
18. TITLE	☐ Change ☐ Addition
19. NAME	
20. STREET ADDRESS	
21. 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 119.07(3)(k), 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

KENNETH E. BUNNEY 5-1-96

SECRETARY

(713) 718-1800

Daytime Phone #

CR2E034 (12/95)