FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

9235 KATY FREEWAY HOUSTON TX 77024

2a. Mailing Address

27

Suite, Apt. #, etc.

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P28287

1. Corporation Name

Principal Place of Business 9235 KATY FREEWAY

2. Principal Place of Business

Suite, Apt. #, etc.

SUITE 400 HOUSTON TX 77024

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MISSION PLANS, INC.

FILED Feb 18, 1999 8:00am Secretary of State

02-18-1999 90083 020 ***150.00



DO NOT WRITE IN THIS SPACE	
Date Incorporated or Qualifed	
02/23/1990	
FEI Number	Applied For
74-1698864	Not Applicable
Certificate of Status Desired	\$8.75 Additional Fee Required

City & State \$5.00 May Be City & State 6. Election Campaign Financing \Box Added to Fees Trust Fund Contribution 28 Zip Country 8. This corporation owes the current year Intangible Country Zip □No ∏Yes 30 Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HALTER, PAUL A., SR. Street Address (P.O. Box Number is Not Acceptable) 4157 WATER OAK LANE JACKSONVILLE FL 32210 83 Zip Code 84 City

3.

4.

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. DELETE 1.1 TITLE PTD TITLE EARTHMAN, DONALD 1.2 NAME NAME 9235 KATY FREEWAY 1.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE 2.1 TITLE TITLE 2.2 NAME EARTHMAN, MICHAEL NAME 9235 KATY FREEWAY 2.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX** 2.4 CRY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE TITLE HERRICK, BRIAN R 3.2 NAME NAME 9235 KATY FRWY STREET ADDRESS 3.3 STREET ADDRESS **HOUSTON TX** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/28/99

(713) 984–1517

32E034 (11/98)