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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P28574

ELIGIBILITY SERVICES, INC.

(2)

FILED May 18 1998 8:00am Secretary of State



Principal Plac	000			- I AMBARABA IIM KINDA KRIBLI AIKEL ANDAN BIRK AIRKL AIDIS		
4144 N CENTRAL EXPWY STE 210		•	Mailing Address 4144 N CENTRAL EXPWY STE 210 200 442 10 442			
DALLAS TX 7			DALLAS TX 75204-7210			
Driegio In Iday III o		• <u>-</u>	Priserio In toggitato			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 03/21/1990
2. Principal P	lace of Business	2a. Mailing Ad	2a. Mailing Address			4. FEI Number Applied For
21		26				75-2312227 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.			\$8.75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23	28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Country	′	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes S No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent
	E PRENTICE-HALL CORPORAT			81	Name	
	IST FLORIDA BANK BUILDING,	, SUITE 420		82	Street Ad	Address (P.O. Box Number is Not Acceptable)
TAI	LLAHASSEE FL 32301			Ĺ		
				83		
				84	City	85 Zip Code
					```,	FL   S   Zip Coule
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Flo	orida Statutes, th	ne abovi	e-named co	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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
Signature: typied or proved name of registered agent and title if applicative: (NOTE Registered Agent signature required when reinstating)						
12.		IND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSO LEGALADO	U		1.1 TITLE		Change Addition
NAME	LOPEZ, LEONARD	^		1.2 NAME	1	
STREET ADDRESS	4144 N CNTRL EXPWY 521	U	l.	1.3 STREET	ADDRESS	
CITY-ST-ZIP	DALLAS TX	· <del>-</del> ·· · · · · · · · · · · · · · · · · ·		1.4 CITY-S	1-ZIP	
TITLE		П	DELETE	2.1 TITLE		Change Addition
NAME			:	2.2 NAME		
STREET ADDRESS				23 STREET	ADDRESS	
CITY-ST-ZIP				2 4 CITY - S	ST-ZIP	
TITLE		Ш	DELETE :	3.1 TITLE		☐ Change ☐ Addition
NAME			;	3.2 NAME		
STREET ADDRESS			] :	3.3 STREET	ADDRESS	į
CITY-ST-ZIP				3.4. CITY - S	ST-ZIP	
TITLE			DELETE	4.1 TITLE	-	Change Addition
NAME			<b>I</b> •	4. 2 NAME		
STREET ADDRESS			J 4	4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY - S	T-ZIP	
TITLE			DELETE	5.1 FITLE	ĺ	Change Addition
NAME				5.2 NAME		
STREET ADDRESS			:	5.3 STREET	ADDRESS	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		5.4 CITY-S	1 - ZIP	
TITLE			DELETE	S.1 TITLE		Change Addition
NAME			(	6.2 NAME		
STREET ADDRESS				S 3 STREET	ADDRESS	
CITY-ST-ZIP				6.4 CITY-S	T - ZIP	
44 Charabus	ortify that the information currelied	with this filling shape			· · · · · · · · · · · · · · · · · · ·	11. O. 11. 140 07(0)() 51 11 01 11 11 11 11 11 11 11 11 11 11 11

receive certify that the information supplied with this ring 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 is rupplemental 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.