

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED  
AND  
FILED

97 AUG -4 AM 10:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P32126

(5)

1. Corporation Name

FLOWTRONEX INTERNATIONAL, INC.

Principal Place of Business

PO BOX 7095  
TYLER TX 75711

Mailing Address

PO BOX 7095  
TYLER TX 75711

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/11/1990

3a. Date of Last Report

01/31/1996

4. FEI Number

75-2349067

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. Yes ☐ No ☒

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

400002260114-6  
-08/06/97-01120-002  
\*\*\*\*173.75 \*\*\*\*173.75  
FL

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)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
WALL, RONALD L.  
5524 CEDAR CREEK LANE  
DALLAS TX

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
PENNINGTON, PAUL G.  
7000 GLENEAGLE DRIVE  
TYLER TX

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
SD  
JONES, AL W.  
3507 MATT LANE  
TYLER TX

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
MARSH, WILLIAM H.  
4021 ELLA LEE LN  
HOUSTON TX

TITLE ☒ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
BROCKWAY, DAVID C  
4875 BRIDLE PATH LANE  
DUBLIN OH

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
MADISON, MICHAEL W  
3809 COVINTON  
PLANO TX

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

☐ Change

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☐ Addition

14. I do 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.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

07/29/97 903/595-6511

CR2E034 (4/97)