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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 24 1997 8:00am Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUI	MENT # P37407	′ (4)			
CANTEX		` '			
OMNIEA					A1611 84644 B4B11 A1611 8164, (AB1
Principal Plac	e of Business	Mailing Address			#
2101 SE 1 STR		PO BOX 340			÷
MINERAL WELLS TX 76067		MINERAL WELLS TX 76068-0340			
US		US			
No.					a. Date of Last Report
9. Principal P	lace of Business	2a, Mailing Address		02/07/1992 4. FEI Number	04/29/1996 Applied For
21	1400 07 54311033	26		13-3645159	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			¢9.75 Additional
22		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 has liability for intan	
24	25 Name and Address of Curren		10	Florida Statutes	s No
				10. Italie and Address of flew Hogiste	ned Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					
PLANTATION FL 33324		82 Street	Address (P.O. Box Number is Not Acceptable)	}	
100	MINION I E GODE		83		
			0.00		
			84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida, Such change was authorated by the change of the change of the change was authorated by the change of the			the above-named	corporation submits this statement for the purpo	se of changing its registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statutes.	porations board or directors. Thereby accept the	appointment as registered
SIGNATURE					
12.	Signature, typod or printed name of registered age OFFICERS ANI		Registered Agent a gnature	required when reinstating) D. ADDITIONS/CHANGES TO OFFICERS	ATE S AND DIRECTORS IN 12
TITLE	C	DELETE	1.170715	MAIDMAN	Change Addition
NAME	HISAYOSHI, UNO		1.2 NAME	HIRONORI KATO 3 CHOME CHIYODA-KU	
STREET ADORESS	3 CHOME CHIYODA-KU		1.3 STREET ADDRESS	3 CHOME CHIYODA-KU	
CITY-\$T-ZIP	TOKYO JA		14 CITY - ST - ZIP	Tokyo, JA	
TITLE	VD	DELETE	2.1 TITLE		Change 💢 Addition
NAME	LEVINE, GEOME M.		2.2 NAME	AKIRA WARA	
STREET ADDRESS	2101 SE 1ST ST		2.3 STREET ADDRESS	AKIRA WAMA 3CHOME PHIYODA-KU	}
CITY-ST-ZIP	MINERAL WELLS TX		2. 4 CITY - ST - ZIP	Tokyo, JA	
TITLE	VINANTA VIVACUI	☐ DELETE	3.1 TITLE		Change Addition
NAME	YUMOTO, KIYOSHI 2101 SE 1ST ST		3.2 NAME		
STREET ADDRESS	MINERAL WELLS TX		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE	VOT	DELFTE	4.1 TITLE		Change Addition
NAME	WALLS, RICHARD D		4. 2 NAME		
STREET ADDRESS	2101 SE 1 STR		4.3 STREET ADDRESS		
CITY-ST-ZIP	MINERAL WELLS TX		4.4 CITY-ST-7IP		
TITLE	P	DELETE	5.1 TITLE		Change Addition
NAME	WIRTANEN, DON W.		5.2 NAME		
STREET ADDRESS	2102 SE 1ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	MINERLA WELLS TX		5.4 CITY - ST - ZIP		
TITLE	V	☐ DELETE	6.1 TITLE		Change Addition
NAME	MCGREGOR, JIM R		6.2 NAME		ļ
STREET ADDRESS	2101 SE 1 STR		6.3 STHEET ADDRESS		
CITY-ST-ZIP	MINERAL WELLS TX		6.4 CITY - ST - ZIP		

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 CLARAD VALLEY RICHARD D. WALLS 4/17/97 (817) 325-3344