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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CURA CAPITAL CORPORATION

FILED

Mar 04 1998 8:00am

Secretary of State

| Principal Place of Bu | siness | Mailing Address | | | | | | | |
|---|---|--|-----------|---|--|---|---|--|--|
| 4733 S. STATE STREET 4733 S. STATE STREET STE. 200 STE. 200 SALT LAKE CITY UT 84107 SALT LAKE CITY UT 84107 | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | 3. Date Incorporated or Qualified 05/14/1992 | | | | |
| | High Tech Or. | 26. Mailing Address 5. | High | Techa. | 4. FEI Number 87-0490775 | | Applied For Not Applicable | | |
| Suite, Apt. #, et.4 22 Sk. A | | Suite Apt. #, etc. A | J | | 5. Certificate of Status Desired | | 3.75 Additional Fee Required | | |
| | ke City UT | 28 Salt Lake | Cit | UT | Election Campaign Financing Trust Fund Contribution | | 5.00 May Be Added to Fees | | |
| 24 21 84047 | 26 CONTUNISA | 29 289047 30 | Couply | USA | This corporation owes or has p Personal Property Tax due Jun | <u></u> 6 ' | | | |
| 9. N | lame and Address of Current | Registered Agent | | - | 10. Name and Address of New Registered Agent | | | | |
| C T COR | Poration System | | 81 | Name | | | | | |
| 1200 S. PINE ISLAND RD. PLANTATION FL 33324 | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | | | | 511661 Address (F.C. box Nulliber is Not Acceptable) | | | | | |
| | | | 83 | | | ··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· | | | |
| | | | 84 | | | FL ⁶⁵ | ' | | |
| Office or registere | ed agent, or both, in the State o | and 607.1508, Florida Statutes, of Florida. Such change was auth ions of, Section 607.0505, Florid | norized b | v the corporation | oration submits this statement for the on's board of directors. I hereby acce | purpose of chan ept the appointm | iging its registered ent as registered | | |
| SIGNATURE | | | | | | | · | | |
| | typed or printed name of registered agent | | | ent signature require | | DATE | | | |
| 12. | OFFICERS AND | | 13, | | ADDITIONS/CHANGES TO OFFI | | | | |
| TITLE CE | · •- | ☐ DELETE | 1.1 TITLE | Cha | urman of the board | | change | | |
| www. WE | HRMFYFR RORFRTAJR | | 1 O MARAE | 1 <i>0.</i> i | J. A. Walanasan | ا عل | | | |

| 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 lifte if applicable (NOTE: Registered Agent signature required when reinstaling) DATE | | | | | | | | | | | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 | | | | | | | | |
| TITLE | CEOD | DELETE | 1.1 TITLE | Chairman of th | e Board . | Change | ☐ Addition | | | | | |
| HAME | WEHRMEYER, ROBERT A JR | | 1.2 NAME | Robert A. Wel | irmayer, Jr. | • | | | | | | |
| STREET ADDRESS | 4733 S. STATE ST, SUITE 200 | | 1.3 STREET ADDRESS | Robert A. Well 4416 San Redro | Ave #104 | | · | | | | | |
| CITY-ST-ZIP | SALT LAKE CITY UT | | 1.4 CITY-ST-ZIP | San Antonio | TX 18212 | | ľ | | | | | |
| TITLE | | DEFELE | 2.1 TITLE | | | Change | Addition | | | | | |
| NAME | NORTON, JOHN C | | 2.2 NAME | | | | | | | | | |
| STREET ADDRESS | 4733 S. STATE STREET, STE. 200 | | 2.3 STREET ADDRESS | | | | | | | | | |
| CITY-ST-ZIP | SALT LAKE CITY UT 84107 | | 2. 4 CITY-ST-ZIP | | | | | | | | | |
| TITLE | VPT | ☐ DELETE | 3.1 TITLE | | | ☐ Change | Addition | | | | | |
| NAME | BROOKS, M. TERRY | | 3.2 NAME | | | | | | | | | |
| STREET ADDRESS | 4733 S. STATE ST., STE. 200 | | 3.3 STREET ADDRESS | | | | | | | | | |
| CITY-ST-ZIP | SALT LAKE SITY UT 84107 | | 3.4. CITY - ST - ZIP | | | | | | | | | |
| TITLE | 8 | ☐ DELETE | 4.1 TITLE | | | Change | Addition | | | | | |
| NAME | CALLISTER, TODO | | 4. 2 NAME | | | | | | | | | |
| STREET ADDRESS | 4733 S. STATE ST., STE. 200 | | 4.3 STREET ADDRESS | | | |] | | | | | |
| CITY-ST-ZIP | SALT LAKE CITY UT 84107 | | 4.4 CITY-ST-ZIP | | | | | | | | | |
| TITLE | CEO | DELETE | 5.1 TITLE | | | Change | Addition | | | | | |
| NAME | DAILY, JOSEPH E. | | 5.2 NAME | | | | | | | | | |
| STREET ADDRESS | 4733 S. STATE ST., SUITE 200 | | 5.3 STREET ADDRESS | | | | | | | | | |
| CITY-ST-ZIP | SALT LAKE CITY UT | | 5.4 CITY - ST - ZIP | | | | | | | | | |
| TITLE | | DELETE | 6.1 TITLE | | | Change | ☐ Addition | | | | | |
| NAME | | | 6.2 NAME | | | | | | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | | | | | | | |

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 of the exemption of the corporation or the receiver of the 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 any attachment with an address.

SIGNATURE:

2/23/98 (210)732-4880