2001 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2001 8:00 am Secretary of State DOCUMENT # P93000073558 1. Entity Name QUEENS HARBOUR CORPORATION 04-23-2001 90046 031 ***150.00 Principal Place of Business Mailing Address 3030 LBJ FREEWAY 3030 LBJ FREEWAY STE 350 STE 350 DALLAS TX 75234 DALLAS TX 75234 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 75-2509681 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change Delete TITLE TITLE ROBERT DEVITZ MOORE, JERRY NAME NAME STREET ADDRESS 3030 LBS FRWY., STE. 700 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX TITI F TITLE Delete ARTZ, BERYL NAME NAME STREET ADDRESS 3030 LBS FRWY., STE. 700 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX hange ☐ Addition Delete TITLE TITLE JEH LONGMIRE POWER, KEVIN NAME NAME 3030 LBS FRWY., STE. 700 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX ☐ Addition ☐ Change TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete

13. 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 report or supplemental 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 trusted empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an addless of the like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYP

LONGMILE 3/16/01 972-243-6191
Date Dayline Phone #