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

Mailing Address

1070 E. INDIANTOWN ROAD

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000075280 (3)

XIAN, INC.

Principal Place of Business

1070 E. INDIANTOWN ROAD

SUITE 410 SUITE 410 JUPITER FL 33477-5144 JUPITER FL 33477 3. Date incorporated or Qualified 3a. Date of Last Report 09/11/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0692377 26 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zic This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MCDONALD, DONNA 1070 E. INDIANTOWN ROAD Street Address (P.O. Box Number is Not Acceptable) **B2 SUITE 410 B3** JUPITER FL 33477 84 City 85 Zip Code 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, typnic or printed name of registered agent and title if applicable [NOTE: Registered Agent signature required when reinstating) (96/6) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change X Addition □ DELETE TITLE 1.1 TITLE PRESIDENT, TREASURER WILLIAMS, RALPH V 1.2 NAME NAME 8615 FREEPORT PKWY., SUITE 200 1.3 STREET ADDRESS STREET ADDRESS **IRVING TX 75063** 1.4 CITY-ST-ZIP CHY-ST-ZIP Change X Addition DELETE TITLE 21 TITLE VICE PRESIDENT 22 NAME NAME LISA G. MOORE 2.3 STREET ADDRESS 1070 E. INDIANTOWN ROAD, SUITE 410 JUPITER, FL 33477 STREET AODRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE SECRETARY 31 TITLE TITLE DONNA McDONALD 3.2 NAME NAME 1070 E. INDIANTOWN ROAD, SUITE 410 3.3 STREET ADDRESS STREET ADDRESS JUPITER, FL 33477 3.4. CITY-ST-ZIP City - St - ZiP DELETE ASSISTANT SECRETARY Change X Addition 4.1 TITLE THILF 4. 2 NAME PEGGY HUNT NAMÉ 8615 FREEPORT PARKWAY., SUITE 200 4.3 STREET ADDRESS STREET ADDRESS IRVING, TK 75063 4.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADURESS CiTY-ST-ZiP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE THLE 6.2 NAME NAME

6.3 STREET ADDRESS

CRY-SI-ZP
 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 if 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

SIGNATURE:

STREET ADDRESS CHY-ST ZIF

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address

1-14-97 561-744-1088

FILED

Apr 17 1997 8:00am

Secretary of State