2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 26, 2004 8:00 am Secretary of State **DOCUMENT # F95000005049** 04-26-2004 90463 010 ***150.00 1ST GLOBAL CAPITAL CORP. Principal Place of Business Mailing Address 8150 N. CENTRAL EXPWY 8150 N. CENTRAL EXPWY SUITE M-100 SUITE M-1000 DALLAS, TX 75206 DALLAS, TX 75206-1815 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite M1000 Suite, Apt. #, etc. 04162004 Chg-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 75-2429960 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C_T_CORPORATION_SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FI 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PCT TITLE ☐ Delete TITLE ☐ Change ☐ ☐ Addition BATMAN, STEPHEN A NAMÉ NAME STREET ADDRESS 8150 N. CENTRAL EXPWY, SUITE M-100 STREET ADDRESS DALLAS, TX 75206 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-21P ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☑ ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 fintal 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if an address, with all other like empowered. I hereby certify that the information supplied with this filling indicated on this report or supplemental report is true and of the corporation or the receiver of changed, or on an attachment w

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen A. Batman, CEO 4/19/04

FILED