

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90103 038 ***150.00

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1. Entity Name
BRAKE CENTERS REALTY CORP.

Principal Place of Business
3810 W. NORTHWEST HIGHWAY, SUITE 240
DALLAS TX 75220

Mailing Address
3810 W. NORTHWEST HIGHWAY, SUITE 240
DALLAS TX 75220

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 75-2623287

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME CLOUD, PERRY W
STREET ADDRESS 3810 W. NORTHWEST HIGHWAY, SUITE 240
CITY-ST-ZIP DALLAS TX 75220 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE VP
NAME CLOUD, BENNETT
STREET ADDRESS 3810 W. NORTHWEST HIGHWAY
CITY-ST-ZIP DALLAS TX 75220 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE S
NAME CLOUD-HAUGH, LEIGH ANNE
STREET ADDRESS 3810 W. NORTHWEST HIGHWAY
CITY-ST-ZIP DALLAS TX 75220 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

12. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR

1/2/03
Date

2142765504
Daytime Phone #

CR2E034 (10/02)