2001 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # L72491** 425 CORAL WAY INVESTMENTS, INC. 04-30-2001 90374 006 ***150.00 Principal Place of Business Mailing Address 11811 NORTH FREEWAY 11811 NORTH FREEWAY C0055226 SUITE 300 SUITE 300 HOUSTON TX 77060 HOUSTON TX 77060 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 52-1687124 Not Applicable Zip Country Zip 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 RD. PLANTATION FL 33324 Z_p Code [3] 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 Signature, typed or printed name of registered agent and tife if applicable. (NOTE: Registered Agent signature required when reinstating) 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 (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DΡ 7171.6 ☐ Addition CR2E034 (10/00 ☐ Change TITLE ☐ Delete RUSCA, FAUSTO NAME MAME VIA C.B. PIODA, 14 STREET ADDRESS STREET ADDRESS CH-6900 LUGANO, SWIT CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐: Addition TITLE HATFIELD, KEN NAME NAM5 11811 NORTH FREEWAY 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **HOUSTON TX** CITY-ST-ZIP Delete TITLE Addition TELE TOMBARI, MICHAEL G. NAME NAME 11811 NORTH FREEWAY 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIE **HOUSTON TX** CITY-ST-ZiP TITLE Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP TITLE Addition THES □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 logal effect as if made under oath; that I am an efficier 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 11 or Block 12 if

FILED