Filing Number:	
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## Cole Jester, Arkansas Secretary of State

## **AMENDED CORPORATION FRANCHISE TAX REPORT 2025**

For the year ending 12/31/2024

Sign in <u>black</u> ink and mail to the address listed below.

1. Business Name and Address:						
Name:	5. Cu	. Current Names of Corporate Governors:				
Address:	Pres	resident:				
City, State, Zip:	Vice	/ice President:				
2. Correct any of the below information, if needed:	Secr					
Tax Contact Name:	Trea	Treasurer:  Controller:  Tax Preparer:				
Address:	Cont					
Address 2:	Tax					
City, State, Zip:	— Fede	aral Tay ID #:				
Phone # of Tax Contact:		eral Tax ID #:				
E-mail Address:	Natu —	re of Business:				
	6.	TOTAL AUTHORIZED CAPITAL STOCK (See Instruction 8)				
ALL INFORMATION IN SECTIONS 3-8 BELOW ARE REQUIRED		NUMBER OF SHARES		PAR VALUE EACH		
DELOW ARE REGUIRED	-	a)	<u></u>	\$		
	-	b)		\$		
3. Registered Agent Information:		c) \$				
Name:	<u> </u>	,	PAR VALUE		R SHARE	
Address:		ISSUED AND OUTSTANDING CAPITAL STOCK				
Address 2:		(See Instruction 9)				
City, State, Zip:		NUMBER OF SHARES PAR VAL		JE EACH	TOTAL	
4. Principal Office Information (in Arkansas):	Ī	a) X \$			= \$	
Address:		b)	) X \$		= \$	
City, State, Zip:		c)	X \$		= \$	
	Ī	d) (Add 9a + 9b + 9c) <b>TOTAL</b> :		OTAL:	= \$	
		NO PAR VALUE = \$25 PER SHARE			R SHARE	
. ÷ = X_	_			=		
Total Bool 9	Amount from I		s Capital Stock	X .003	TAX DUE	
MINIMUM TAX DUE \$150 • IF LESS THAN \$150 PAY \$	150 • COP	PORATIONS WIT	HOUT AUT	HORIZED	STOCK PAV \$300	
I declare, under the penalties of perjury, that the fore					•	
Executed this day of		_,	<u>-</u>			
(Day) (Month) Print Name_	Qi,	(Year) gnature				
i iiii I <b>v</b> aiii <del>o</del>	SI				Treas., Cont., or Tax Preparer	

Rev. 1/25