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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* POWELL JOHN C						IRS'		ASH F	ker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify					
(Last) (First) (Middle) 690 E. LAMAR BLVD. #400						3. Date of Earliest Transaction (Month/Day/Year) 06/10/2005								X Omeer (give the Other (specify below) below) SVP Information Technology				
(Street) ARLINGTON TX 76011					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(City) (State) (Zip)				-								Form filed by More than One Reporting Person						
		Tak	ole I - Noi	n-Deriv	vativ	e Se	curi	ties Ac	quired, D	ispos	sed o	f, or Bei	nefici	ally Owned	ł			
1. Title of Security (Instr. 3) Date (Month/D							if any	eemed ition Date h/Day/Yea	e, Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 ar		nd Securiti Benefici	es	Form (D) o	n: Direct	7. Nature of Indirect Beneficial Ownership	
							(,		Code V	' An	nount	(A) or (D)	Pric	Reporte Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
									uired, Dis s, options									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		and	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivative Security	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	ive ies cially ing ed ction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		ation	Title	Amour or Numbe of Shares	er				
Options	\$45	06/10/2005			J ⁽¹⁾	v		15,000	01/28/2005	01/28	3/2015	Common Stock	15,00	0 (1)	135,00	00	D	
Options	\$50	06/10/2005			J ⁽¹⁾	v		15,000	01/28/2005	01/28	/2015	Common Stock	15,00	0 (1)	120,00	00	D	
Options	\$55	06/10/2005			J ⁽¹⁾	v		15,000	01/28/2005	01/28	/2015	Common Stock	15,00	0 (1)	105,00	00	D	
Options	\$19.33								12/15/2004	01/29	/2014	Common Stock	1,87	5	105,00	00	D	
Options	\$19.33								01/29/2004	01/29	/2014	Common Stock	5,62	5	105,00	00	D	
Options	\$13.37								10/01/2008	10/01	/2013	Common Stock	7,50	0	105,00	00	D	
Options	\$6.67								01/29/2008	01/29	/2013	Common Stock	15,00	00	105,00	00	D	
Warrants	\$5.33								04/03/2007	04/03	/2012	Common Stock	15,00	00	105,00	00	D	
Options	\$25								01/28/2005	01/28	/2015	Common Stock	15,00	0	105,00	00	D	
Options	\$30								01/28/2005	01/28	/2015	Common Stock	15,00	00	105,00	00	D	
Options	\$35								01/28/2005	01/28	/2015	Common Stock	15,00	00	105,00	00	D	
Options	\$40								01/28/2005	01/28	/2015	Common Stock	15,00	0	105,00	00	D	

Explanation of Responses:

1. On June 10, 2005, the issuer cancelled certain options granted to the reporting person on January 28, 2005, with no value received by the reporting person from the cancellation.

John C. Powell

** Signature of Reporting Person Date

06/21/2005

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.