2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 12, 2001 8:00 am Secretary of State **DOCUMENT # F70158** 1. Entity Name KRAMER, GREEN, ZUCKERMAN, KAHN & GREENE, P.A. 03-12-2001 90436 027 ***150.00 Principal Place of Business Mailing Address BILLAG - FI 4000 HOLLYWOOD BOULEVARD 4000 HOLLYWOOD BOULEVARD 化中心性 医电影性 电电路电路 电电路 SUITE 485 SOUTH SUITE 485 SOUTH HOLLYWOOD FL 33021 A LIGHT BE CONTROLLYWOOD FL 33021 ** 1.90 O. 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2178562 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KRAMER, ROBERT M Street Address (P.O. Box Number is Not Acceptable) 4000 HOLLYWOOD BOULEVARD SUITE 485 SOUTH HOLLYWOOD FL 33021 Zip Code City FL 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 egent and title 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change Addition ☐ Delete TITLE TITLE NAME NAME KRAMER, ROBERT M STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BV #485 S CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Addition Delete TITLE ☐ Change TITLÉ NAME NAME ZUCKERMAN, LESLIE H STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BV #485 S CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL TITLE ☐ Delete TITLE NAME NAME GREEN, MITCHELL F STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BOULEVARD #485 S CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Addition TITLE SD ☐ Delete TITLE NAME NAME KAHN, HOWARD N STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BOULEVARD #485 S CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Change ☐ Addition TITLE ASD ☐ Delete TITLE NAME GREENE, CRAIG M NAME STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BLVD, SUITE 485 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. It 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 11 or Block 12 if changed, or on an attachine it withan address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR