## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 10, 2001 8:00 am Secretary of State DOCUMENT # **L35182** 1. Entity Name NORTHWESTERN CAPITAL CORPORATION 05-10-2001 90053 013 \*\*\*150.00 Principal Place of Business Mailing Address ONE BAYFRONT PLAZA: SUITE 1100 ONE BAYFRONT PLAZA: SUITE 1100 100 SOUTH BISCAYNE BOULEVARD 100 SOUTH BISCAYNE BOULEVARD MIAMI FL 33131 MIAMI FL 33131 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 65-0165492 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JEROME HOLLO B & C CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) MIAMI CENTER; SUITE 3000 100 S. BISCAYNE BLVD., 201 SOUTH BISCAYNE BOULEVARD MIAMI FL 33131 City MIAMI ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entit SIGNATURE Signature, typed or print agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to sa isfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and electe 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 OFFICERS AND DIRECTORS 12. 11. **VDS** Addition Change TITLE ☐ Delete BAER, STEVE NAME STREET ADDRESS 100 S. BISCAYNE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL PD ☐ Delete Change ☐ Addition TITLE HOLLO, WAYNE R. NAME NAME STREET ADDRESS -100 S. BISCAYNE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAM! FL Change ☐ Addition ☐ Delete TITLE TITLE HOLLO, TIBOR NAME NAME 100 SO BISCAYNE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL ☐ Addition TITLE ☐ Change ☐ Delete TITLE YAFFA, PHILLIP A. NAME NAME STREET ADDRESS 100 S. BISCAYNE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 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 attachment with an address, with all other like empowered.

WAYNE HOLLO 4/18/01 305/358-7710 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #