2002 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2002 8:00 am \$ Secretary of State P99000079056 DOCUMENT # 1. Entity Name PHG HOLDINGS, INC. Principal Place of Business Mailing Address 9400 S DADELAND BLVD STE 100 9400 S DADELAND BLVD STE 100 MIAMI FL 33156 MIAMI FL 33156 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0948918 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 WOHL, MICHAEL D Street Address (P.O. Box Number is Not Acceptable) 9400 S DADELAND BLVD STE 100 **MIAMI FL 33156** City Zip Code 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 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 TITLE ☐ Defete TIT! F Change ☐ Addition WOHL, MICHAEL O NAME NAME 9400 \$ DADELAND BLVD STE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33156** CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete Change NAME DEUTCH, DAVID NAME 9400 S DADELAND BLVD # 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33156** CITY-ST-ZIP ngeهیعک∏ TITLE ☐ Delete TITLE ☐ Addition FEIEDMAN, MITCHELL NAME NAME Friedman. Mitchell 9400 S DADELAND BLVD #100 STREET ADDRESS STREET ADDRESS MIAMI FL 33156 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition WOLFSON, LOUIS III NAME NAME 9400 S DADELAND BLVD STE 100 STREET ADDRESS STREET ADDRESS **MIAMI FL 33156** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 enfloyment.

SIGNATURE:

changed, or on an attachment with an address, with all