2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Sep 09, 2004 8:00 am Secretary of State DOCUMENT # P36483 1. Entity Name 09-09-2004 90006 026 ***550.00 GEORGE G. SHARP, INC. Principal Place of Business Mailing Address 100 CHURCH STREET 100 CHURCH STREET C1121,UFC NEW YORK NY 10007 NEW-YORK-NY-10007 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) Applied For 4. FEI Number City & State City & State 13-5628360 Not Applicable Zip Country 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE'ISLAND ROAD PLANTATION FL 33324 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Addition NAME ROLIH, I. HILARY STREET ADDRESS 100 CHURCH STREET STREET ADDRESS CITY-ST-ZIP NEW YORK NY CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME CHIN, ALLEN NAME 100 CHURCH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK NY CITY-ST-ZIP TITLE Delete TITLE ☐ Change □ Addition YANG, CHI-CHENG NAME NAME STREET ADDRESS STREET ADDRESS 100 CHURCH STREET CITY-ST-ZIP NEW YORK NY CITY-ST-ZIP VP ☐ Delete TITLE ☐ Change ☐ Addition TITLE RIESS, JAMES R NAME NAME STREET ADDRESS 5041 CORPORATE WOODS DRIVE STREET ADDRESS CITY-ST-ZIP VIRGINIA BEACH VA CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ERLEMANN, EILEEN J. NAME NAME 100 CHURCH STREET STREET ADDRESS STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE SENECA, AL NAME NAME 100 CHURCH STREET STREET ADDRESS STREET ADDRESS

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

NEW YORK NY

INTED NAME OF SIGNING OFFICER OR DIRECTOR

8/31/04 (2/2) 732 2800 Date Daytime Phone #

FILED