2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State
04-30-2003 90097 023 ***150.00

062321 AT

DOCUMENT # F02000001341

1. Entity Name
CM INTERNATIONAL SHOPPES III, INC.

Principal Place of Business	Mailing Address
11200 ROCKVILLE PIKE. 5TH FLOOR ROCKVILLE MD 20852	11200 ROCKVILLE PIKE. 5TH FLOOR ROCKVILLE MD 20852

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
11200 ROCKVILLE PIKE	ATTN. JULIE WHITE 11200 ROCKVILLE PK
Suite, Apt. #, etc. 4th FLOOR	Suite, Apt. #, etc. 4th FLOOR
City & State ROCKVILLE, MD	City & State ROCKVILLE, MD
Zip / Country 20852 / USA	Zip / Country 20852 / USA

4. FEI Number APPLIED FOR ~~APPLIED FOR~~ 03-0403533 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C DOCKSER, WILLIAM B 11200 ROCKVILLE PIKE, 5TH FLOOR ROCKVILLE MD 20852	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C/P/D BARRY S. BLATTMAN 11200 ROCKVILLE PIKE ROCKVILLE, MD 20852	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPS WILLOUGHBY, H. WILLIAM 11200 ROCKVILLE PIKE, 5TH FLOOR ROCKVILLE MD 20852	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CRAIG M. LIEBERMAN 11200 ROCKVILLE PIKE ROCKVILLE, MD 20852	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT AZZARA, CYTHIA O 11200 ROCKVILLE PIKE, 5TH FLOOR ROCKVILLE MD 20852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V/T	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V IANNARONE, DAVID B 11200 ROCKVILLE PIKE, 5TH FLOOR ROCKVILLE MD 20852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/S SUSAN B. RAILEY 11200 ROCKVILLE PIKE ROCKVILLE, MD 20852	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MARK A. LIBERA 11200 ROCKVILLE PIKE ROCKVILLE, MD 20852	☐ Change ☐ Addition

CR2E034 (10/02)

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.

SIGNATURE: SIGNATURE REQUIRED MARK A. LIBERA VICE PRESIDENT GENERAL COUNSEL 301-255-0676
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #