2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 13, 2001 8:00 am Secretary of State **DOCUMENT # 286888** 1. Entity Name CORE MARKETS, INC. 02-13-2001 90303 001 ***900 00 . . . : Mailing Address Principal Place of Business 800 SYLVAN AVE 800 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632 **ENGLEWOOD CLIFFS NJ 07632** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1090160 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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 DATE 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. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition Channe Delete TITLE TITLE A. Peter Harwich 390 Park AVE PHILLIPS, ROBERT M NAME NAME 33 BENEDICT PLACE STREET ADDRESS STREET ADDRESS NY 10022 CITY-ST-ZIP **GREENWICH CT 06830** CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE KURTZ. MELVIN H NAME NAME 33 BENEDICT PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **GREENWICH CT 06830** CITY-ST-ZIP ☐ Addition Change TITLE Delete TITLE LEONARD, KENNETH C NAME NAME 33 BENEDICT PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GREENWICH CT 06830 CITY-ST-ZIP AST Change ☐ Addition □ Delete TITI F KRANTZ, JOHN NAME NAME 800 SYLVAN AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD CLIFFS NJ 07632 PTD Delete Addition ☐ Change TITLE TITLE RICE, J.W. NAME NAME STREET ADDRESS 390 PARK AVE STREET ADDRESS CT06830 **NEW YORK NY 10022** CITY-ST-7IP CITY-ST-7IP Change ☐ Addition TITLE Delete TITLE NAME NAME

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 of 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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP