FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Mar 25, 2002 8:00 am Secretary of State DOCUMENT # 442158 1. Entity Name 03-25-2002 90072 034 ***150.00 THE ART INSTITUTE OF FORT LAUDERDALE, INC. Principal Place of Business Mailing Address C/O EMC 300 6TH AVENUE 1799 SE 17TH ST FORT LAUDERDALE FL 33316-0013 8TH FLOOR PITTSBURG PA 15222 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1500255 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) **1201 HAYS ST** TALLAHASSEE FL 32301 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) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, OFFICERS AND DIRECTORS (9/01) Assistant Secretary TITLE ☐ Delete Susan Minahas NAME NAME KALABOKE, WILLIAM S CR2E034 300 SIXTARVE. STREET ADDRESS STREET ADDRESS 1799 SE 17TH STREET CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33316 TITLE ☐ Delete □ Change ☐ Addition NAME GRIBBLE, KRISTEN H STREET ADDRESS STREET ADDRESS 300 SIXTH AVENUE CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15222 TITLE ☐ Delete TITLE ☐ Change Addition NAME CLOVER, KATHLEEN NAME STREET ADDRESS STREET ADDRESS 300 SIXTH AVE, 8TH FLOOR CITY-ST-7IP CITY-ST-7IP PITTSBURGH PA 15222 ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STEINBERG, FREDERICK W. STREET ADDRESS STREET ADDRESS 300 6TH AVENUE CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA Delete ☐ Change ☐ Addition TITI F TITLE NAME NAME CYPHER, ROBERT STREET ADDRESS STREET ADDRESS 300 6TH AVENUE CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA Delete TITLE ☐ Change ☐ Addition NAME NORTHROP, EILEEN L. NAME STREET ADDRESS 1799 SE 17TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 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

SIGNATURE:

usan Minakan Susan Minakan SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered