2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 600409 Feb 23, 2000 8:00 am **Secretary of State** NIXON, BLAUSTEIN, TUCHMAN-RATZAN & LUTZKY, M.D. 02-23-2000 90001 018 ***150.00 Principal Place of Business Mailing Address 4306 ALTON ROAD 3/F 4306 ALTON ROAD 3/F MIAMI BEACH FL 33140-2840 MIAMI BEACH FL 33140 2. Principal Place of Business 3. Mailing Address 8201 Beverly Boulevard same Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc نسي د د ــــ Applied For City & State City & State 4. FEI Number 59-1217259 Not Applicable Los Angeles, CA Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 90048 USA 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 RD. PLANTATION FL 33324 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable DATE (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 Tax filing requirement and elects to do so. After MAY 1, 2000 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 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE ☐ Delete TITLE JESSUP, PETER H NAME NAME STREET ADDRESS 8201 BEVERLY BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES CA 90048 ☐ Addition Change CFOT Delete TITLE TITLE NAME ROGERS, PETER D NAME STREET ADDRESS STREET ADDRESS 8201 BEVERLY BLVD. CITY-ST-7iP CITY-ST-ZIP LOS ANGELES CA 90048 ☐ Addition Delete TITLE Change TITLE GODDARD, JOHN G NAME NAME 1800 CONCORD PIKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WILMINGTON DE 19803** Change ☐ Addition TITLE ☐ Delete TITLE NAME DAVIES, GREGORY A NAME 1800 CONCORD PIKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WILMINGTON DE 19803** X Change ☐ Delete TITLE ☐ Addition TITLE Goff, Anita GOFF, WITA NAME STREET ADDRESS STREET ADDRESS 8201 BEVERLY BLVD. CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES CA 90048 ☐ Change Delete TITLE ☐ Addition TITLE BOOTH-BARBARIN, ANN V NAME NAME STREET ADDRESS 1800 CONCORD PIKE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WILMINGTON DE 19803**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE

Ann V. Booth-Barbarin

1/17/00

(302) 886-3091

Daytime Phone #