FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 24, 2002 8:00 am **DOCUMENT # 711873 Secretary of State** 07-24-2002 90141 008 ****70 00 RUMBAUGH-GOODWIN INSTITUTE FOR CANCER RESEARCH, Principal Place of Business Mailing Address 0 1 T 1 A 2 1850 N.W. 69TH AVENUE 1850 N.W. 69TH AVENUE SUITE #5 SUITE #5 PLANTATION FL 33313 PLANTATION FL 33313 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-0866119 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Walter Aller Street Address (P.O. Box Number is Not Acceptable) DAUPHINEE, DR. MICHAEL J lete see change 1850 N.W. 697H AVE. 1850 NW 69 Ave, #5 PLANTATION FL 33313 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 (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be After September 13, 2002, Trust Fund Contribution. Added to Fees Department of State min. will be \$236.25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Change PD ☐ Delete TITLE NAME LEWIS, NELL M NAME STREET ADDRESS STREET ADDRESS 1340 S.E. 7TH AVE. CITY-ST-ZIP CITY-ST-ZIP POMPANO BCH FL Addition ☐ Change Delete TITLE NAME SPECK, HARRY STREET ADDRESS STREET ADDRESS 75 ISLA BAHIA CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL ☐ Addition TITLE Delete NAME DAUPHINEE, MICHAEL STREET ADDRESS STREET ADDRESS 1534 LANTANA DR. CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 32226 ☐ Change ☐ Addition ☐ Delete TITLE TD TITLE MARSHMAN, EDWARD NAME NAME STREET ADDRESS STREET ADDRESS 630 RIVIERA ISLE CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL Change SD ☐ Addition ☐ Delete TITLE SPIRO, CYRIL NAME STREET ADDRESS STREET ADDRESS 2206 \$ UNIVERSITY DR CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33324 ☐ Delete TITLE Change ☐ Addition D TITLE HING, WONG NAME NAME

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 617, 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

2870 N COMMERCE PARKWAY

MIRAMAR FL 33025

STREET ADDRESS

City+St-7IP

SIGNACIALLEEQUILLE

7/19/02

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