∽2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # 855832** Feb 04, 2000 8:00 am Secretary of State CENTURY NATIONAL PROPERTIES INCORPORATED 02-04-2000 90051 042 ***150.00 Mailing Address Principal Place of Business 12200 SYLVAN ST 12200 SYLVAN ST NORTH HOLLYWOOD CA 91606-3229 NORTH HOLLYWOOD CA 91606 914000 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 95-3677269 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7.- Name and Address of New Registered Agent 6.:Name and Address of Current Registered Agent-Name COOK, RICHARD R. Street Address (P.O. Box Number is Not Acceptable) 309 OAKRIDGE BLVD, SUITE C DAYTONA BEACH FL 32013 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 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 Change ☐ Delete TITLE TITLE GIBBONS, BRIAN NAME NAME WILSON, WELDON STREET ADDRESS 70 TESSERA AVENUE STREET ADDRESS 3930 ALOMAR DR CITY-ST-ZIP FOOTHILL RANCH, CA 92610 CITY-ST-ZIP SHERMAN OAKS CA Change ☐ Addition TITLE Delete KRIER, GERALD A. - DECEASED 5-5-99 NAME 1081 WESTCREEK LANE CITY-ST-ZIP **WESTLAKE VILLAGE C 91362** Change Addition -THE Delete BALICKI, MARIÉ NAME STREET ADDRESS 19925 LANARK STREET CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CANOGA PARK CA Addition Change ☐ Delete TITLE NAME NAME OSBORN, JUDITH STREET ADDRESS STREET ADDRESS 7134 POMELO DRIVE CITY-ST-ZIP CITY-ST-ZIP WEST HILLS CA 91307 ☐ Change ☐ Addition Delete TITLE TITLE NAME KRAMER, LAWRENCE NAME STREET ADDRESS STREET ADDRESS 1350 CAPRI CITY-ST-ZIP CITY-ST-ZIP PACIFIC PALISADES CA ☐ Change ☐ Detete TITLE ☐ Addition TITLE NAME RIGNEY, WILLIAM D III STREET ADDRESS STREET ADDRESS 12940 HARTSOOK STREET CITY-ST-ZIP SHERMAN OAKS CA

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

174,00

800-733-0880

Date

Daytime Phone #