2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 858411

1. Entity Name

FIRST UNION COMMERCIAL CORPORATION



FILED Apr 07, 2003 8:00 am Secretary of State

04-07-2003 90183 024 ***150.00

| Principal Place of Business ONE WACHOVIA CENTER CHARLOTTE N. 28288 US 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State | ONE WACHOVIA CHARLOTTE NC : 2. Principal Place Suite, Apt. #, 6 | CENTER 26288 e of Business | TWO WACHOVIA CEN NC0200-J CAMP CHARLOTTE N. 28288 US 3. Mailing Address | | | | · | |
|---|---|--|--|---|-------------------|--|------------------|------------------|
| Suite, Apt. #, etc. City & State Country Country Country S. Certificate of Status Desired \$8.75 Additional Fee Required \$8.75 Additional Fee Required Name Name | Suite, Apt. #, 6 | <u> </u> | | | | | | |
| City & State City & State City & State 4. FEI Number 13-2647352 Applied Fc Not Applied See Required For Not Applied Fc Not Applied 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST. STE. 105 TALLAHASSEE FL 32301 City FL 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. I am familiar with, and acc the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaing) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. | | etc. | | | |) 130101 16451 61101 12411 61001 11601 11601 6401 | 8:61: | (1881 B1881 HSB) |
| Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST. STE. 105 TALLAHASSEE FL 32301 City FL 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. I am familiar with, and acc the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. | City & State | | Suite, Apt. #, etc. | | | ☐ CHECK HERE IF MAKII | NG CHANGES | |
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12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELICIANI SA

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

GOINS, VICE PRI

5. 4/3/03 374-68

Daytime Phone #