

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2001 8:00 am
Secretary of State

09-13-2001 90045 037 ***550.00

0137447 AB

DOCUMENT # F00000001244

1. Entity Name
PMI USA, INC.

Principal Place of Business
CORPORATE TRUST CENTER
1209 ORANGE STREET
WILMINGTON DE 19801

Mailing Address
CORPORATE TRUST CENTER
1209 ORANGE STREET
WILMINGTON DE 19801



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

51-0397037

Applied For

Not Applicable

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete
 NAME **NEUMAN, ERIC C**
 STREET ADDRESS **200 CRESCENT COURT, SUITE 1600**
 CITY-ST-ZIP **DALLAS TX 75201**

TITLE **D** ☐ Change ☐ Addition
 NAME **Neuman, Eric C**
 STREET ADDRESS **200 Crescent Court, Suite 1600**
 CITY-ST-ZIP **Dallas, TX 75201**

TITLE **V** ☒ Delete
 NAME **SLACK, JEFFERSON**
 STREET ADDRESS **380 MADISON AVENUE, 7TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY 10022**

TITLE **P** ☐ Change ☐ Addition
 NAME **Ganley, James**
 STREET ADDRESS **4000 Hollywood Blvd., Suite 1800**
 CITY-ST-ZIP **Hollywood, FL 33021**

TITLE **S** ☐ Delete
 NAME **WEAVER, CHRISTINA**
 STREET ADDRESS **1325 AVENUE OF THE AMERICAS, 25TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY 10019**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VT** ☐ Delete
 NAME **KNICKEL, DAVID**
 STREET ADDRESS **1325 AVENUE OF THE AMERICAS, 25TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY 10019**

TITLE **VT** ☒ Change ☐ Addition
 NAME **Knichel, David**
 STREET ADDRESS **200 Crescent Court, Suite 1600**
 CITY-ST-ZIP **Dallas, TX 75201**

TITLE **D** ☒ Delete
 NAME **BAEZ, CESAR A**
 STREET ADDRESS **1325 AVENUE OF THE AMERICAS, 25TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY 10019**

TITLE ☐ Change ☒ Addition
 NAME **Assistant S**
 STREET ADDRESS **John Civas**
 CITY-ST-ZIP **1325 Avenue of the Americas, 25th Floor**
New York, NY 10019

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **Assistant S**
 STREET ADDRESS **Robert Cardenas**
 CITY-ST-ZIP **4000 Hollywood Blvd., Suite 1800**
Hollywood, FL 33021

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 other like empowered.

SIGNATURE:

Signature Required
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/4/01
 Date

Daytime Phone #

CR2E034 (5/01)