2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) F01000002906 **DOCUMENT #**



FILED Jan 23, 2003 8:00 am Secretary of State

01-23-2003 90164 044 ***150.00

10775 CARIBBEAN BOULEVARD HOTEL CORP.							
Principal Place of Business C/O JP MORGAN CHASE 52 BROADWAY. 3RD FLOOR NEW YORK NY 10004-1669		Mailing Address C/O JP MORGAN CHASE 52 BROADWAY. 3RD FLOOR NEW YORK NY 10004-1669					
	lace of Business ASHINGTON BLVD, 21FL	3. Mailing Address 575 WASHINGTON BLVD., 21FL.			A MEDALAKA ERAL DELBA MARM DARIH DARIH DE		IBALIT BAIN ABBA
Suite, Apt. 21FLOC	#, etc. DR	Suite, Apt. #, etc. 212FLOOR			☐ CHECK HERE IF MAKING CHANGES		
City & State JERSEY	CITY, NEW JERSEY	City & State JERSEY CITY, NEW JERSEY			4. FEI Number 13-4175103	<u> </u>	plied For t Applicable
^{Zip} 073	Country USA	Zip 07310	Country USA		5. Certificate of Status Desired	□ \$8.75 Add Fee Required	
	6. Name and Address of Current R	egistered Agent		مين عدر	7. Name and Address of New Regis	tered Agent	
1			Nan	ne	_		
C T CORPORATION SYSTEM			-	Street Address (P.O. Box Number is Not Acceptable)			
1200 SOI	JTH PINE ISLAND ROAD		Street Address		CO. Box Number is Not Acceptable)		
	ON FL 33324		-				
PLANIAII	UN FL 33324						j
			City			FL Zip Code	•
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered offic	ce or registere	ed agent, or both, in the State of Florida	. I am familiar with,	and accept
	and the second second						
SIGNATURE .							(
	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Agent s	signaturé required	when reinstating)	DATE	
Fi	LE NOW!!! FEE IS \$150.00				• Shorting Occupation Figure	- 65.0	•
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					S. Election Campaign Financ Trust Fund Contribution.		O May Be to Fees
10.	OFFICERS AND D	URECTORS	11.	 	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS	S IN 11
TITLE	PD	☐ Delete	TITLE	PD		*X Change	Addition
NAME	MCDONAGH, JOHN P	C Beine	NAME	Γ-	IAGH, JOHN P	- Control of the cont	
STREET ADDRESS	380 MADISON AVE., 9TH FLOOR		STREET ADDR		-		ì
CITY-ST-ZIP	NEW YORK NY 10004-1669		CITY-ST-ZIP	2/U F	PARK AVE., 20 FLOOR PORK, NEW YORK 0017		Ì
TITLE	V	Delete	TITLE	V D	Old, HEN TOLK COT	³ ∠ ¥ Change	☐ Addition
NAME	HARRINGTON, JOSEPH S SR.	Delete	NAME	L -	NGTON, JOSEPH S JR	La Change	ACCIOON
STREET ADDRESS	380 MADISON AVE., 9TH FLOOR		STREET ADDRI	4	•		}
CITY-ST-ZIP	NEW YORK NY 10004-1669		CITY-ST-ZIP		PARK AVE., 20TH FLOOR		};
	_ 		.	NEW X	ORK, NEW YORK 10017	. EST. A	
TITLE	S CANDEDS CUBTIS O	K KDelete	TITLE) 		XX Change	☐ Addition
NAME	SANDERS, CURTIS O		NAME CTREET ADDR	1	PH, MARIE Y		
STREET ADDRESS CITY-ST-ZIP	52 Broadway, 3rd floor New York Ny 10004-1669		STREET ADDRI	P/J N	ASHINGTON BLVD., 21	FLOOR	
	4EM 10UV MI 1004-1003	_		PERSE	Y CITY, NEW JERSEY O		
TITLE	OAMBBELL VENTON A	☐ Delete	TITLE	n.		≭ Change	Addition
NAME	CAMPBELL, KENTON A		NAME	. 1	BELL, KENTON A		
STREET ADDRESS CITY-ST-ZIP	52 Broadway, 3rd Floor New York Ny 10004-1669		STREET ADDRE	P, • •	ASHINGTON BLVD., 21F		{
	14217 10111 141 10007-1009		┫——	NEW J	ERSEY, JERSEY CITY O		PER Address
TITLE		Defete	TITLE	1.	DOLLCT & C. P.	☐ Change	X Addition
NAME STREET ADDRESS		•	NAME STREET ADDRE	•	, DOUGLAS T	T 00E	}
CITY-ST-ZIP			CITY-ST-ZIP	10,0	WASHINGTON BLVD., 211 EY CITY, NEW JERSEY (1
			4	OEKS.	EI CIII, NEW UERBEY		
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition
NAME STREET ADADESS			NAME OXDEST ADDRES	-00			
STREET ADORESS CITY-ST-ZIP			STREET ADDRE	:55			1
UII1-31-ZIP			CITY-ST-ZIP				

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 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.

Kentonza Campbell Reflection SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

Daytime Phone #