2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

Feb 19, 2002 8:00 am Secretary of State F01000004090 DOCUMENT # 1. Entity Name ISLAND TRADING RETAIL, INC. 02-19-2002 90106 019 ***150.00 Principal Place of Business Mailing Address 601 WEST 26TH STREET, 11TH FLOOR 601 WEST 26TH STREET, 11TH FLOOR NEW YORK NY 10001 **NEW YORK NY 10001** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-3792017 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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, typed or printed name of registered agent and title if applicable. (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, 2002 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (9/01) VD ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME VINSON, MARY NAME STREET ADDRESS 601 WEST 26TH STREET, 11TH FLOOR STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10001** CITY-ST-ZIP Addition ☐ Delete ☐ Change VD TITLE TITLE NAME HART, WENDY NAME STREET ADDRESS 601 WEST 26TH STREET, 11TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10001 ☐ Change ☐ Addition ST. TITLE □ Delete TITLE FRIEDMAN, MEG NAME NAME 601 WEST 26TH STREET, 11TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10001 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition D TIT! F WRIGHT, TONY NAME NAME 601 WEST 26TH STREET, 11TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10001** CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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 11 or Block 12 if

FILED

Daytime Phone #