2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 13, 2006 8:00 am Secretary of State DOCUMENT # F01000005720 1. Entity Name 04-13-2006 90286 027 ***150.00 PLC OBC, INC. Principal Place of Business Mailing Address 333 NEW HYDE PARK RD #100 333 NEW HYDE PARK RD #100 NEW HYDE PARK NY 11042 **NEW HYDE PARK NY 11042** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 73-0987420 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 Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD PLANTATION FL 33324 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 accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when roinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete JIJI F Change Addition NAME SCHINDLER, MIKE NAME STREET ADDRESS STREET ADDRESS 3333 NEW HYDE PK RD CITY-ST-ZIP CITY-ST-ZIP NEW HYDE PARK NY 11042 ☐ Delete TITLE Change Addition TITLE PLYNN, MIKE NAME NAME STREET ADDRESS 3333 NEW HYDE PK RD STREET ADDRESS CITY-ST-ZIP NEW HYDE PARK NY 11042 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition COOPER, MILTON STREET ADDRESS STREET ADDRESS 3333 NEW HYDE PK RD CITY-ST-ZIP CITY-ST-ZIP NEW HYDE PARK NY 11042 Defete TITLE Change Addition TITLE PAPAGALLO, MIKE NAME NAME STREET ADDRESS STREET ADDRESS 3333 NEW HYDE PK RD NEW HYDE PARK NY 11042 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition VISCONSI, JOHN NAME NAME 17140 BERNARDO CENTER DRIVE STREET ADDRESS STREET ADDRESS SAN DIEGO CA 92128 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

FILED