2005 FOR PROFIT CORPORATION

Mar 08, 2005 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # F03000006475 03-08-2005 90188 033 ***150.00 1. Entity Name ROUTE 46 MANAGEMENT ASSOCIATES CORP. Principal Place of Business Mailing Address 50023918 700 RT. 46 E 700 RT. 46 E FAIRFIELD, NJ 07004 FAIRFIELD, NJ 07004 2. Principal Place of Business 3. Mailing Address 71 S Wacker Dr. 71 S Wacker Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. 02042005 CR2E034 (10/03) Chg-P 12th Floor 12th Floor Applied For City & State City & State 4. FEI Number Chicago, Not Applicable Chicago, APPLIED FOR Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 60606 USA 60606 USA 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 Zio 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 if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete Change ☐ Addition THILE TITLE BERNADINO, JOSEPH NAME NAME 700 RT. 46 E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FAIRFIELD, NJ 07004 CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition TITLE P/AS/T/D SZYMANSKI, RICHARD NAME NAME Richard Szymanski 700 Rt. 46 E. Fairfield, NJ 07004 STREET ADDRESS 700 RT. 46 E STREET ADDRESS CITY-ST-ZIP FAIRFIELD, NJ 07004 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition Susan Armstrong NAME NAME VP/S/D STREET ADDRESS STREET ADDRESS 700 Rt. 46 E CITY-ST-ZIP CITY-ST-ZIP Fairfield, NJ 07004 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP Delete TITLE Change Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP

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.

Richard Szymanski

SIGNATURE

FILED