

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000000471

1. Entity Name
LODEX BRICKELL, INC.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90045 016 ***550.00

Principal Place of Business
1180 AVENUE OF THE AMERICAS, 18TH FLOOR
NEW YORK NY 10036

Mailing Address
1180 AVENUE OF THE AMERICAS, 18TH FLOOR
NEW YORK NY 10036

2. Principal Place of Business
220 EAST 42ND STREET
Suite, Apt. #, etc.
27TH FLOOR

3. Mailing Address
220 EAST 42ND STREET
Suite, Apt. #, etc.
27TH FLOOR

City & State
NEW YORK, NY

City & State
NEW YORK, NY

Zip
10017

Country
USA

Zip
10017

Country
USA

4. FEI Number **13-3696937**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
STE 105
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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 13, 2000 Min. 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
TANSEY, FRANCIS X
1180 AVE OF THE AMERICAS, 18TH FL
NEW YORK NY 10036 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
SUMMERS, BRIAN T
1180 AVE OF THE AMERICAS, 18TH FL
NEW YORK NY 10036 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
LUSKI, DAVID
1180 AVE OF AMERICAS
NEW YORK NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
220 EAST 42ND STREET, 27TH FLOOR
NEW YORK, NY 10017

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

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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED: BRIAN T. SUMMERS

9/13/00

42-697-4740

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)