## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED May 04, 2000 8:00 am Secretary of State DOCUMENT # F93000003931 HOPLANT CORP. 05-04-2000 90147 013 \*\*\*150.00 Mailing Address Principal Place of Business 600 E. LAS COLINAS BLVD., SUITE 1900 C/O GOLDMAN SACHS & CO 100 CRESCENT COURT STE 1000 IRVING TX 75039-5626 DALLAS TX 75201 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-3730257 Not Applicable Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. Change Addition ☐ Delete TITLE TITLE EDLEMAN, MARTIN L NAME NAME STREET ADDRESS 888 7TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** Change ☐ Addition D ☐ Delete TITLE KATZ, RICHARD NAME STREET ADDRESS STREET ADDRESS 888 7TH AVENUE CITY-ST-7IP **NEW YORK NY** CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE ROTHENBERG, STUART NAME NAME STREET ADDRESS **85 BROAD STREET** STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **NEW YORK NY** ☐ Addition Change ☐ Delete TITLE WILLIAMS, TODD NAME NAME STREET ADDRESS 100 CRESCENT COURT STE 1000 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX Change ☐ Addition D ☐ Delete TITLE WINN, BRUCE NAME NAME STREET ADDRESS STREET ADDRESS 1013 CENTRE ROAD CITY-ST-ZIP CITY-ST-ZIP WILMINGTON DE ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME

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

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS