*2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F93000003931 1. Entity Name

FILED Apr 28, 2002 8:00 am Secretary of State 04-28-2002 90778 016 ***150.00

| HOPLANI | CORP. | | | | 04-20-2002) | 0776 010 | 150 | 7.00 |
|--|--|--|---------------------------------------|--|---|--|----------|-------------------------|
| Principal Place | e of Business | Mailing Address | | | | | | |
| 600 E LAS COLINAS BLVD SUITE 400 IRVING TX 75039 US | | 600 E LAS COLINAS BLVD SUITE 400 IRVING TX 75039 US | | | | | | |
| 2. Principal P | lace of Business | 3. Mailing Address | | | | a iki ba iki baka a kik | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | |
| City & State | | City & State | | 4. F | El Number 13-3730257 | | | olied For Applicable |
| Zip Country | | Zip Country | | 5. 0 | Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| <u> </u> | 6. Name and Address of Current F | Registered Agent | | 7. N | lame and Address of New Reg | istered Agent | <u> </u> | |
| | | | Name | | | | | <u></u> |
| THE PRENTICE-HALL CORPORATION SYSTEM, INC. | | | Street Ac | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | 'S STREET, SUITE 105 | | | | | · | | |
| TALLAHAS | SSEE FL 32301 | | City | | | FL Zi | p Code | |
| 2 The above | named entity submits this statement for | the purpose of changing its re | aistered office or | registered age | ent, or both, in the State of Florid | la. | | |
| o. The above | Trained Criticy Scottino this statement for | the purpose of analogmig to the | 3 | 3 | | | | |
| SIGNATURE. | Signature, typed or printed name of registered agent a | nd title if applicable. (NOTE: R | egistered Agent signatu | re required when re | instating) | DATE | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) | | FILE NOW!!! After May 1, 2002 Make Check Payable | | 50.00 | 10. Election Campaign Finan Trust Fund Contribution. | | | May Be to Fees |
| 11. | OFFICERS AND I | DIRECTORS | 12. | | DITIONS/CHANGES TO OFFICE | ERS AND DIRE | CTORS | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D EDLEMAN, MARTIN L 888 7TH AVENUE NEW YORK NY | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 888 S | TOR EL NFLSEN EVEMTH AVENUE ORK, NY 10106 | <u> </u> | nange | ⊠ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D KATZ, RICHARD 888 7TH AVENUE NEW YORK NY | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DIREC G DOU 100 C | | | | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ROTHENBERG, STUART 85 BROAD STREET NEW YORK NY | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | — DAIJER | | C | nange | Addition . |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Delete TITL NAM 100 CRESCENT COURT STE 1000 DALLAS TX | | | **SEE AND | **SEE ADDENDUM ATTACHED HERETO Addition AND INCORPORATED HEREIN** | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DOYLE, MICHAEL 1013 CENTRE ROAD WILMINGTON DE 19805-1297 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | c | hange | ☐ Addition |
| TITLE | THE THE PART OF TH | ☐ Delete | TITLE NAME | | | C | hange | Addition |

indicated on this report of supplemental report is true and accurate and that my signature sharinave the same legal effect as it made that report is true and accurate and that my signature sharinave the same legal effect as it made that report is true and accurate 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:

