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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Feb 03, 2003 8:00 am **Secretary of State** F93000004268 DOCUMENT # 02-03-2003 90157 012 ***150.00 STRUCTURE-TONE, INC. Principal Place of Business Mailing Address 15 EAST 26TH STREET 15 EAST 26TH STREET NEW YORK NY 10010-1589 NEW YORK NY 10010-1589 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 13-2687699 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete ☐ Change ☐ Addition TITLE TITLE DONAGHY, JAMES K NAME NAME 15 EAST 26TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10010** CITY-ST-7IP **SEVP** TITLE ☐ Delete TITLE ☐ Change Addition WHITE, JOHN T NAME NAME 15 EAST 26TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW YORK NY** CiTY-ST-7IP **CFO** ` Change TITLE ☐ Delete TITLE ■ Addition FROIMOWITZ, RAY NAME NAME STREET ADDRESS STREET ADDRESS 15 EAST 26TH ST CITY-ST-ZIP CITY-ST-ZIP NY NY ☐ Change TITLE ☐ Delete TITLE ☐ Addition CARVETTE, ANTHONY NAME NAME STREET ADDRESS 15 EAST 26TH ST STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME CAHILL, DAVID NAME 15 E 26TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NY NY CITY-ST-ZIP VC ☐ Delete TITLE Addition DONAGHY, BRIAN NAME NAME 15 E 26TH ST STREET ADDRESS STREET ADDRESS **NEW YORK NY 10010** CITY-ST-ZIP CITY-ST-ZIP

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 597, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachm h an address, with all

SIGNATURE: