2001 UNIFORM BUSINESS REPORT (UBR) May 03, 2001 8:00 am COCUMENT # F95000000339 1. Entity Name Secretary of State RMIC Corporation 05-03-2001 91120 048 ***150.00 Principal Place of Business Mailing Address 190 Pak Plaza Blvd. 190 Oak Plaza Blvd. Atten: Legal Dept. Winston-Salem, NC 27105 Winston-Salem, NC 27105 C0058451 2. Principal Place of Business 3. Mailing Address ٠ در وز لاي Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-3048119 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT Corporation System 1200 S. Pine Island Road Street Address (P.O. Box Number is Not Acceptable) Plantation, FL 33324 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See critería on back) __ []. Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (11/00) TITLE Change ☐ Addition ☐ Delete TITLE White William G or 5 75 M.Rt. 413 LWedge Drive Praffiown NC 27040 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition Dew Jimmy 5 Box 8277 Bermuda Run 5 8 NAME NAME STREET ADDRESS STREET ADDRESS Advance NC 27006 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition Zucaro, Alv 126 Nantucket Lane NAME NAME STREET ADDRESS STREET ADDRESS Barrington, IL® CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE Simpson, William; Simpson, William, 4 190 OakiPlaza Blvd 3 Winston-Salem, NC 2710 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP ☐ Change Addition TITLE □ Delete TITLE Pasternak; Joel H: Pasiernas 190 Oak Plaza Blvd & Winston-Salem NC 27105 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition Dixon, Beth 190 Oak, Plaza Blvd NAME NAME STREET ADDRESS STREET ADDRESS Winston-Salem, NC 27105 CITY-ST-ZIP CITY-ST-ZIP 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 attachmen rith an addres er like empowere.

OFFICER OR DIRECTOR

SIGNATURE:

4/23/01

Date

(336) 661-1500

Daytime Phone #