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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000002298 (6)

CB 9350 FINANCIAL CENTRE, INC.

MARKLING, JOSEPH W

LOS ANGELES CA 90017

Markling, Joseph W

865 S. FIGUEORA STREET, SUITE 3500

533 FREEMONT AVENUE, 5TH FLOOR

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

885 S. FIGUEROA STREET 865 S. FIGUEROA STREET **SUITE 3500 BUITE 3500** LOS ANGELES CA 90017-5472 LOS ANGELES CA 80017-2543 3. Date Incorporated or Qualified 3a. Date of Last Report 05/10/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEL Number Applied For 95-4528481 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No.

10. Name and Address of New Registered Agent 25 30 24 29 9, Name and Address of Current Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registéred Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. DELETE Change Addition TITLE 1.131016CLOTFELTER, RICHARD C NAME 1.2 NAME 865 S. FIGUEROA STREET, SUITE 3500 STREET ADDRESS 1.3 STREET ADDRESS LOS ANGELES CA 90017-2543 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE tracy, scott e NAME 2.2 NAME 865 S. FIGUEROA STREET, SUITE 3500 STREET ADORESS 2.3 STREET ADDRESS Los Angeles CA 90017 LOS ANGELLES CA 90017 CITY-ST-ZIP 2. # CITY-ST-ZIP DELETE Addition TITLE 3 1 101 (STARK, TODD E NAME 3.2 NAME 865 S. FIGUEROA STREET, SUITE 3500 STREET ADDRESS 3 9 STREET ADDRESS LOS ANGELES CA 90017 34. CITY-ST-ZIP CITY-ST-ZIP TITLE DELFTE 4.1 THLE Change Addition NAME romanak, laurie e 4. 2 NAME 865 SOUTH FIGUEROA STREET, SUITE 3500 STREET ADDRESS 4.3 STREET ADDRESS LOS ANGELES CA 90017 4.4 CHY-ST-7IP CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE

LOS ANGELES CA LOS Angeles CA 90017 14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. 13 if changed, or on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.\$ STREET ADDRESS

D/Exec.VP

5.4 CITY - ST - ZIP

Addition

☐ Change

865 S. Figueroa Street, Suite \$500

arrow, Stanton H. 165 S. Figueroa Street, Suite 3500

FILED

May 06 1997 8:00am

Secretary of State