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FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002298 (6)

1. Corporation Name

CB 9350 FINANCIAL CENTRE, INC.

Principal Place of Business

865 S. FIGUEROA STREET
SUITE 3500
LOS ANGELES CA 90017-2543

Mailing Address

865 S. FIGUEROA STREET
SUITE 3500
LOS ANGELES CA 90017-2543

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/10/1995

4. FEI Number

95-4528481

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME CLOTFELTER, RICHARD C
STREET ADDRESS 865 S. FIGUEROA STREET, SUITE 3500
CITY-ST-ZIP LOS ANGELES CA 90017-2543

☐ DELETE

TITLE DVP
NAME TRACY, SCOTT E
STREET ADDRESS 865 S. FIGUEROA STREET, SUITE 3500
CITY-ST-ZIP LOS ANGELES CA

☐ DELETE

TITLE S
NAME STARK, TODD E
STREET ADDRESS 865 S. FIGUEROA STREET, SUITE 3500
CITY-ST-ZIP LOS ANGELES CA 90017

☐ DELETE

TITLE T
NAME ROMANAK, LAURIE E
STREET ADDRESS 865 SOUTH FIGUEROA STREET, SUITE 3500
CITY-ST-ZIP LOS ANGELES CA 90017

☐ DELETE

TITLE SRVP
NAME MARKLING, JOSEPH W
STREET ADDRESS 865 S FIGUEROA STREET, #3500
CITY-ST-ZIP LOS ANGELES CA

☒ DELETE

TITLE DEV
NAME ZARROW, STANTON H
STREET ADDRESS 865 S FIGUEROA STREET, #3500
CITY-ST-ZIP LOS ANGELES CA

☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME Zerbst, Robert H.
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

2.1 TITLE D/SVP
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

3.1 TITLE S/D
3.2 NAME Roth, Herbert L.
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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.

SIGNATURE:

[Signature]

4/29/98

(213) 683-4200

CR2E034 (10/97)