FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 22, 2001 8:00 am Secretary of State DOCUMENT # F9600000576 1. Entity Name 05-22-2001 90037 015 ***150.00 BNY TAMPA, INC. Mailing Address Principal Place of Business PO BOX 817 769936 1401 E 7TH AVE **CROTON FALLS NY 10519** TAMPA FL 33605 IIS 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For 4. FEI Number City & State 59-3366990 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent XL CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 4435 OLD WINTER GARDEN RD. ORLANDO FL 32802 City 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, typed or printed name of registered agant and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Tax filing requirement and elects to do so. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Delete TITLE Change Addition **PSTD** TITLE NAME PEDLOW, ROBERT NAME STREET ADDRESS STREET ADDRESS 470 MAMARONECK AVE. CITY-ST-ZIP CITY-ST-ZIP WHITE PLAINS NY 10605 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delate TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 or required by Chapter 607, Florida Statutes: and that my name appears in Block 11 or Block 12 if

changed, or on an attachment with an address

SIGNATURE!

Attach ment F9600000576.

25 Hubbels Drive, Mt. Kisco, NY 10549 -769936

Phone: (914) 242-7280 Fax: (914) 242-7199

May 2, 2001

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Ref. Number: F96000000576 Letter Number: 601A00023899

To Whom It May Concern:

This letter is in response to a notice that we received from you claiming that we didn't enclose a completed 2001 Uniform Business Report with our check. We did indeed send this report with our check. I spoke with a Markita from the Division of Corporations on April 26, 2001, concerning this matter. She instructed me to send you a photocopy of our copy of the report we submitted. Enclosed is a copy of that report, and check # 6284, paying the annual fee. Please adjust your records accordingly.

Thank you for your time. If you have any questions, I can be reached at (914) 242-7280, Ext. 215.

Sincerely,

Lisa Russell Accountant