2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 19, 2001 8:00 am Secretary of State DOČUMENT # **F96000004478** TARPON POWER, INC. 04-19-2001 90333 045 ***150.00 Principal Place of Business Mailing Address 335 MADISON AVE 335 MADISON AVE 28TH FLOOR 28TH FLOOR NEW YORK NY 10017 NEW YORK NY 10017 2. Principal Place of Business 3. Mailing Address c/o Sithe Energies, Inc. c/o Sithe Energies, Inc. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 335 Madison Ave., 28th FL 335 <u>Madison Ave., 28th FL</u> City & State City & State 4. FEI Number Applied For 13-3905722 New York, NY New York, NY Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 10017 10017 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UNITED CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 9200 SOUTH DADELAND BLVD. SUITE 508 MIAMI FL 33156-0000 Zin 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. Signature, typed or printed name of registered agent and title if applicable. (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 criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PCD** ☐ Delete P/C/D X Change CR2E034 (10/00) TITLE ☐ Addition NAME KRIEGEL, WILLIAM NAME STREET ADDRESS STREET ADDRESS 335 MADISON AVE 28TH FLOOR CITY-ST-ZIP CITY-ST-7IP NEW YORK NY 10017 V/T TITLE Delete X Change TITLE Addition NAME MANILLA, SANDRA J NAME STREET ADDRESS STREET ADDRESS 335 MADISON AVE. 28TH FLOOR CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017 TITLE ☐ Delete TITLE □ Change ☐ Addition ROSENBERG, MARTIN B NAME STREET ADDRESS STREET ADDRESS 335 MADISON AVE, 28TH FLOOR CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017 TITLE ☐ Delete TITI E Addition NAME NAME Sullivan, Barry F. STREET ADDRESS STREET ADDRESS 335 Madison Ave., 28th FL. CITY-ST-ZIP CITY-ST-ZIP New York, NY 10017 TITLE ☐ Delete TITLE Change **X** Addition NAME NAME Boehlert, Thomas STREET ADDRESS STREET ADDRESS 335 Madison Ave., 28th FL. CITY-ST-ZIP CITY-ST-7IP New York, NY 10017 TITLE ☐ Delete TITLE X Addition NAME NAME Park, Hyun STREET ADDRESS STREET ADDRESS 335 Madison Ave., 28th FL. 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 attachment with an address, with all other like empowered.

Sandra J.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(212) 351-0000