2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 20, 2000 8:00 am Secretary of State DOCUMENT # **F96000004509** PHOENIX RECEIVABLES II. INC. 02-20-2000 90006 007 ***150.00 Mailing Address Principal Place of Business 2401 KERNER BLVD 2401 KERNER BLVD SAN RAFAEL CA 94901 SAN RAFAEL CA 94901-5569 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 68-0368692 Not Applicable Ζίρ Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD 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 DATE 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 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. \Box Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11. ☐ Addition ☐ Delete TITLE ☐ Change TITLE CONSTANTIN, GUS NAME NAME STREET ADDRESS STREET ADDRESS 2401 KERNER BLVD CITY-ST-ZIP CITY-ST-ZIP SAN RAFAEL CA 94901 Addition ☐ Delete Change TITLE **VPGS** TITLE NAME OLSEN, LISA A STREET ADDRESS STREET ADDRESS 2401 KERNER BLVD. CITY-ST-ZIP C!TY-ST-ZIP SAN RAFAEL CA 94901 ☐ Delete ☐ Addition **CFOD** TITLE Change TITLE NAME SOLOVEI, HOWARD NAME STREET ADDRESS STREET ADDRESS 2401 KERNER BLVD CITY-ST-ZIP CITY-ST-ZIP SAN RAFAEL CA 94901 ☐ Change ☐ Addition TITLE VD X Delete TITLE TONG, BRYANT J NAME NAME STREET ADDRESS STREET ADDRESS 2401 KERNER BLVD CITY-ST-ZIP CITY-ST-ZIP SAN RAFAEL CA 94901 Addition Change ☐ Delete TITLE TITLE NAME MARTINEZ, GARY NAME STREET ADDRESS STREET ADDRESS 2401 KERNER BLVD CITY-ST-7IP CITY-ST-ZIP SAN RAFAEL CA 94901 ☐ Change ☐ Addition TITLE D ☐ Delete TITLE FABER, ED NAME NAME STREET ADDRESS STREET ADDRESS 2401 KERNER BLVD CITY-ST-ZIP SAN RAFAEL CA 94901

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.

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

SIGNATURE:

NAME OF SIGNING OFFICER OF DIRECTO