2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 03, 2001 8:00 am Secretary of State DOCUMENT # F96000005903 1. Entity Name FWI 1. INC. 05-03-2001 91162 013 ***150.00 Principal Place of Business Mailing Address 225 LIBERTY ST. 225 LIBERTY ST. 14TH FLOOR 14TH FLOOR NEW YORK NY 10080-6114 NEW YORK NY 10080-6114 2. Principal Place of Business 3. Mailing Address 95 95 Greene Greene Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Fl. THE P City & State City & State 4. FEI Number Applied For 13-3917811 ersec Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 07302-3815 07302 - 3815 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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 Signature, typed or printed name of registered agent 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 ☐ Change ☐ Addition TITLE ☐ Delete TITLE CARUSO, JAMES V NAME NAME 225 LIBERTY ST. 14 FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10080-6114** ☐ Change Delete TITLE ☐ Addition LURIE. MICHAEL NAME NAME STREET ADDRESS 225 LIBERTY ST 14 FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10080-6114 TITLE Delete TITI F __ Change __ Addition... NAME HAUGH, GERARD M NAME STREET ADDRESS 225 LIBERTY ST 14 FLOOR STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10080-6114 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE VALENTI, JOSEPH S NAME NAME 225 LIBERTY ST. 14 FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10080-6114 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MARINARO, FRANK NAME 225 LIBERTY ST. 14 FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP NEW YORK NY 10080-6114 VΡ TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME MAY, BERNARD NAME

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

CITY-ST-ZIP

STREET ADDRESS

225 LIBERTY ST 14 FLOOR

NEW YORK NY 10080-6114

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Greacod Hough V.P. 04/24/01 (201) 671-0314