## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 20, 2000 8:00 am Secretary of State DOCUMENT # **F97000000906** PAGE PLAZA MANAGEMENT CORPORATION 03-20-2000 90146 034 \*\*\*150.00 Principal Place of Business Mailing Address C/O WHARTON REALTY GROUP C/O PLAY KNITS 240 WEST 40TH ST 2100 ROUTE 35. SUITE A SEA GIRT NJ 08750 NY NY 10018-1510 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City, & State Applied For City & State 4. FEI Number 22-3498649 Not Applicable Zip Country Zip 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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 · Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550,00 $\Box$ Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PC ☐ Addition □ Detete TITLE ☐ Change TITLE NAME NAME TAWIL, SAUL R STREET ADDRESS STREET ADDRESS C/O 2100 ROUTE 35, SUITE A CITY-ST-ZIP CITY-ST-ZIP SEA GIRT NJ 08750 ☐ Addition ☐ Change ☐ Defete TITLE TITLE NAME MASSRY, DANIEL STREET ADDRESS STREET ADDRESS C/O 2100 ROUTE 35, SUITE A CITY-ST-ZIP CITY-ST-ZIP SEA GIRT NJ 08750 Change Addition TITLE - 🗖 Delete - - . TITLE NAME NAME SUTTON, SHARON STREET ADDRESS STREET ADDRESS C/O 2100 ROUTE 35, SUITE A CITY-ST-ZIP CITY-ST-ZIP SEA GIRT NJ 08750 Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME SITT, MARILYN STREET ADDRESS STREET ADDRESS C/O 2100 ROUTE 35, SUITE A CITY-ST-ZIP CITY-ST-7IP SEA GIRT NJ 08750 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 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.

SIGNATURE: