2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2001 8:00 am Secretary of State DOCUMENT # F9700004723 .. 1. Entity Name G.P. WEST BROWARD RETAIL, INC. 05-01-2001 90068 014 ***150.00 Principal Place of Business Mailing Address 3011 W. GRAND BLVD., #2405 3011 W. GRAND BLVD., #2405 DETORIT MI 48202 DETORIT MI 48202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 38-3370120 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CUMMINGS + ASSOCIATES PETER D. CHASEN, DONALD L Street Address (P.O. Box Number is Not Acceptable) 3399 PGA BLVD. SUITE 450 3399 PGA BLVD STE 450 PALM BEACH GDNS FL 33410 Zip Code 33410 City PALM BEACH GARDENS is statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above names A DEAN VP SIGNATURE of agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This colporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 OFFICERS AND DIRECTORS 12. 11. Change Addition **PTDC** ☐ Delete TITLE TITLE DAVIDA. DEAN NAME **CUMMINGS. PETER** NAME STREET ADDRESS 3399 PGA BLVD, SUITE 450 STREET ADDRESS 3011 W. GRAND BLVD., #2405 CITY-ST-ZIP PALM BEACH GARDENS FL 33410 CITY-ST-ZIP DETORIT MI 48202 ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME Cummings, Keith L STREET ADDRESS STREET ADDRESS 3399 PGA BLVD -STE 450 CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GDNS FL 33410 ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME CHASEN, DAVID L STREET ADDRESS STREET ADDRESS 3399 PGA BLVD -STE 450 CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GDNS FL 33410 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

DAVID A. DEAN, VP SIGNATURE: E OF SIGNING OFFICER OR DIRECTOR