## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 01, 2001 08:00 AM F97000006721 DOCUMENT# 1. Entity Name **Secretary of State** AMERICAN BUYING RETIREMENT SERVICES, INC. Principal Place of Business Mailing Address 330 WABASH AVE., #2007 330 WABASH AVE., #2007 CHICAGO IL IL 60611 60611 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 36-4034035 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL323012525 US Zip 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. 02/01/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (11/00) ☐ Delete TITLE ☐ Addition MAME ZUCKERMAN SOL. NAME 2121 PONCE DE LEON., SUITE 1100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33134 CITY-ST-ZIP TITLE D ☐ Delete TITLE X Change ☐ Addition NAME JARBOE JOHN NAME SCHEINBERG STEVEN STREET ADDRESS 700 NEWPORT CTR., DRIVE 4TH FL STREET ADDRESS 1111 KANE CONCOURSE, SUITE 411 CITY-ST-ZIP NEWPORT CA 92660 CITY-ST-ZIP BAY HARBOR FL33154 Delete TITLE ☐ Addition SHERIDAN ROBERT NAME STREET ADDRESS 330 N WABASH AVE STE 2007 STREET ADDRESS CITY-ST-ZIP CHICAGO $\mathbf{I}$ 60611 CITY-ST-ZIP EVPS ☐ Delete TITLE Change Change ☐ Addition KURENSKY NAME STREET ADDRESS 330 N WABASH AVE STE 2007 STREET ADDRESS CITY-ST-ZIP CHICAGO 60611 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SHERIDAN MARC NAME STREET ADDRESS 1111 KANE CONCOURSE., SUITE 411 STREET ADDRESS CITY-ST-ZIP BAY HARBOR 33154 CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE: MARC SHERIDAN P 02/01/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #