2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am Secretary of State DOCUMENT # F98000000361 1. Entity Name RAIL OPERATING SUPPORT GROUP, INC. 03-06-2002 90064 012 ***150.00 Principal Place of Business Mailing Address 5300 BROKEN SOUND BLVD NW 5300 BROKEN SOUND BLVD NW **BOCA RATON FL 33487 BOCA RATON FL 33487** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0797247 Not Applicable Country Zip 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. The labove 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) 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, 2002 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 OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CFO ☐ Change XX Addition PTDC TITLE TITLE ☐ Delete MARINO, GARY O NAME Bennett Marks NAME STREET ADDRESS 5300 BROKEN SOUND BLVD NW STREET ADDRESS 5300 Broken Sound Blvd., NW **BOCA RATON FL 33487** CITY-ST-ZIP CITY-ST-ZIP Boca Raton, FL 33487 Treasurer ☐ Change XX Addition ☐ Delete TITLE TITLE Michael Howe REDFEARN, DONALD D NAME 5300 BROKEN SOUND BLVD NW STREET ADDRESS 5300 Broken Sound Blvd., NW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33487** Boca Raton, FL 33487 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME BUSH, LARRY W NAME STREET ADDRESS 5300 BROKEN SOUND BLVD NW STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP **BOCA RATON FL 33487** TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE 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.

CR2E034 (9/01

FILED