2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: Lawrit thine JA

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # F98000002048 May 24, 2000 8:00 am Secretary of State NEWMARK INTERNATIONAL, INC. 05-24-2000 90062 044 ***150.00 Principal Place of Business Mailing Address TWO PERIMETER PARK SOUTH TWO PERIMETER PARK SOUTH SUITE #475 WEST SUITE #475 WEST BIRMINGHAM AL 35243 BIRMINGHAM AL 35243-2329 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-3061181 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 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 City 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 (NDTE: 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, 2000 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 11. ☐ Addition TITLE TITLE MALL, DR. HANS-PETER gang 1 NAME NAME POSTFACH 1480 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP D-92304 NEUMARKT, GERMANY CITY-ST-ZIP ☐ Addition ☐ Delete TITLE RAUSCHER, HELMUT NAME POSTFACH 1480 STREET ADDRESS STREET ADDRESS D-8430 NEUMARKT, GERMANY CITY-ST-ZIP CITY-ST-ZIP **PCEO** TITLE Change Addition TITLE ☐ Delete FOUST, EARL NAME NAME STREET ADDRESS TWO PERIMETER PARKS, STE #475W STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35243** CITY-ST-ZIP VCFO TITLE ☐ Addition X Delete TITLE PRICE, LARRY NAME NAME enimeter lar 400 WEST MARKET ST., 32ND FL. STREET ADDRESS STREET ADDRESS inmingham, AL 3524 CITY-ST-ZIP **LOUISVILLE KY 40202** CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Henlein Carl A. HEINLEIN; EARL A . NAME NAME 400 WEST MARKET ST., 32ND FL. STREET ADDRESS STREET ADDRESS Two Perimeter Park Suth suite 475 W LOUISVILLE KY 40202 -CITY-ST-ZIP CITY-ST-782 Birminghan, AL 35243 ☐ Change X Addition TITLE TITLE ☐ Delete 218616R RICHARD NAME NAME STREET ADDRESS STREET ADDRESS POSTFACH 1480 CITY-ST-ZIP D-12304 NEUMARKT, GERMANY CITY-ST-7IP 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 617, 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.