FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 02, 2001 8:00 am Secretary of State DOCUMENT # F98000002054 JOURNAL OF COMMERCE, INC. 04-02-2001 90312 042 ***150.00 Principal Place of Business Mailing Address DORAL CORPORATE PLAZA DORAL CORPORATE PLAZA 3750 NW 87TH AVE., STE. 450 3750 NW 87TH AVE., STE. 450 MIAMI FL 33178 MIAMI FL 33178 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 13-3255959 Not Applicable Zip Country Zip 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 Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** City 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. 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition CR2E034 (10/00 ALEXANDER, HELEN NAME NAME STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10048 CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition MALIK, KIRAN NAME NAME STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10048** CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME HANGER, DAVID NAME STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10048** CITY-ST-ZIP SCFO TITLE ☐ Delete ☐ Change ☐ Addition HARABEDIAN, MARK NAME NAME STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10048** CITY-ST-ZIP TITLE Delete ☐ Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME 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.