2001 UNIFORM BUSINESS REPORT (UBR) FILED May 11, 2001 8:00 am Secretary of State DOCUMENT # **F98000003013** THE INSTITUTE FOR ECONOMETRIC RESEARCH, INCORPOR 05-11-2001 90099 002 ***150.00 Mutual Funds Magazine Inc. 12/21/00Principal Place of Business Mailing Address 2200 SOUTHWEST TENTH ST. 2200 SOUTHWEST TENTH ST. DEERFIELD BEACH FL 33342 DEERFIELD BEACH FL 33342 UUU4733X 2. Principal Place of Business 3. Mailing Address Life Bldg Time and Time and Life Bldg Suite, Apt. #, etc. 1271 6thAve RM 42-15 Suite, Apt. #, etc. 1271 6th Ave. RM 42-15 DO NOT WRITE IN THIS SPACE City & State New York, NY City & State 4. FEI Number Applied For 59-1357729 NY, YNY Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 10020 USA10020 USA Fee Required 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 City 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) DATE 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 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PCEO** ☐ Delete TITLE Change ☐ Addition NAME KIESELSTEIN, DAVID W NAME STREET ADDRESS 1271 AVE OF THE AMERICAS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NEW YORK NY 10020 TITLE ٧Ţ ☐ Delete TITLE ☐ Addition □ Change ATKINSON, RICHARD NAME NAME STREET ADDRESS 1271 AVE OF THE AMERICAS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10020** TITLE ☐ Delete TITLE Change NAME FRIEDMAN, RICHARD I NAME

☐ Addition STREET ADDRESS 1271 AVENUE OF THE AMERICAS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10020** Change TITLE ☐ Delete TITLE Addition MCCARTHY, ROBERT E NAME NAME STREET ADDRESS 1271 AVENUE OF THE AMERICAS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10020** TITLE Delete TITLE Change ■ Addition MITCHELL, E. LEN NAME STREET ADDRESS 1271 AVENUE OF THE AMERICAS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10020 TITLE X Delete TITLE Assistant Treasurer ☐ Change Addition NAME CHRISTIE, WARREN A NAME Linda Klang STREET ADDRESS STREET ADDRESS 1271 AVENUE OF THE AMERICAS 75 Rockefeller Plaza 5th Fl

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 empowered.

CITY-ST-ZIP

SIGNATURE:

NEW YORK NY 10020

CITY-ST-ZIP

Len Mitchell INTED NAME OF SIGNING OFFICER OR DIRECTOR

VP-Tax

New York, NY

10019

SRZE034 (10/00)