2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Jan 26, 2001 8:00 am Secretary of State DOCUMENT # F9800003416 WESTFIELD CONCESSION MANAGEMENT, INC. 01-26-2001 90090 018 ***150.00 🛫 🖰 Mailing Address Principal Place of Business 1601 WILSHIRE BLVD, 12TH FLOOR 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES CA 90025 LOS ANGELES CA 90025 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 95-4673300 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 Zip Code 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. (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 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 PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition GREEN. RICHARD E NAME NAME STREET ADDRESS 11601 WILSHIRE BLVD. 12TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES CA 90025 TITLE ☐ Delete TITLE ☐ Change ☐ Addition LOWY, PETER S NAME NAME STREET ADDRESS 11601 WILSHIRE BLVD. 12TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -LOS ANGELES CA 90025 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STEFANEK, MARK NAME STREET ADDRESS 11601 WILSHIRE BLVD. 12TH FLOOR STREET ADDRESS CITY-ST-ZIP LOS ANGELES CA 90025 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME VAZELAKIS. DIMITRI NAME STREET ADDRESS 11601 WILSHIRE BLVD. 12TH FLOOR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LOS ANGELES CA 90025 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PACKER, RORY NAME STREET ADDRESS 11601 WILSHIRE BLVD. 12TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES CA 90025 S ☐ Delete TITLE ☐ Change □ Addition NAME HEPNER, IRV NAME STREET ADDRESS 11601 WILSHIRE BLVD. 12TH FLOOR STREET ADDRESS CITY-ST-ZIP LOS ANGELES CA 90025 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 expowered 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 an other like empowered.

Itv Hepner, Secretary

INTED NAME OF SIGNING OFFICER OR DIRECTOR