2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED May 12, 2000 8:00 am Secretary of State DOCUMENT # F98000004812 1. Entity Name MIG II REALTY ADVISORS, INC. 05-12-2000 90074 013 ***150.00 Principal Place of Business Mailing Address 5025 SWETLAND COURT 5025 SWETLAND COURT CLEVELAND OH 44143 **CLEVELAND OH 44143-1467** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 34-1867964 Not Applicable Zip Country 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 Ziờ 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) DATE 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. Added to Fees Trust Fund Contribution. П (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition ☐ Change TITLE TITLE ☐ Delete FRIEDMAN, JEFFREY L NAME NAME STREET ADDRESS 5025 SWETLAND COURT STREET ADDRESS **CLEVELAND OH 44143** CITY-ST-7IP CITY-ST-ZIP ☐ Addition Delete. TITLE . TITLE WRIGHT, LARRY E NAME NAME **5025 SWETLAND COURT** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CLEVELAND OH 44143** ☐ Change ☐ Addition TITLE ☐ Delete COTE, JAMES A NAME NAME 5025 SWETLAND COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CLEVELAND OH 44143** CITY-ST-ZIP SVPC ☐ Change ☐ Addition TITLE ☐ Delete TITLE GUTIN, KATHLEEN L NAME NAME **5025 SWETLAND COURT** STREET ADDRESS STREET ADDRESS **CLEVELAND OH 44143** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE HUGHES. WILLIAM T JR NAME NAME STREET ADDRESS 5025 SWETLAND COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **CLEVELAND OH 44143** SVPC **Change** Addition TITLE ☐ Delete TITLE VOGT, LOUIS E NAME NAME **5025 SWETLAND COURT** STREET ADDRESS STREET ADDRESS **CLEVELAND OH 44143** CITY-ST-ZIP ICHMOND 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.

Daytime Phone #