2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F98000005586 Feb 24, 2000 8:00 am Secretary of State JOHN TURANO & SONS, INC. 02-24-2000 90041 009 ***150.00 Principal Place of Business Mailing Address 80 RICHARDS ST **80 RICHARDS ST** BROOKLYN NY 11231-1625 BROOKLYN NY 11231 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 11-2064659 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FEINBERG, JEFF Street Address (P.O. Box Number is Not Acceptable) 4000 HOLLYWOOD BLVD., SUITE 350 HOLLYWOOD FL 33021 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 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition TITLE TITLE Delete TURANO, GIACOMP NAME STREET ADDRESS **80 RICHARDS ST** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BROOKLYN NY 11231** ☐ Change ☐ Addition ☐ Delete TITLE TITLE TURANO, FRANK NAME NAME **80 RICHARDS ST** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BROOKLYN NY 11231** CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TURANO, JOHN NAME NAME STREET ADDRESS STREET ADDRESS **80 RICHARDS ST** CITY-ST-ZIP CITY-ST-ZIP **BROOKLYN NY 11231** ☐ Addition ☐ Change ☐ Delete TITLE TITLE TURANO, ROSA NAME STREET ADDRESS STREET ADDRESS **80 RICHARDS ST** CITY-ST-ZIP CITY-ST-ZIP **BROOKLYN NY 11231** ☐ Delete TITLE Change Addition TITLE

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.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIF

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

1/31/00

(518)625-0060

Change

☐ Addition

CR2E034 (9/99

Daytime Phon