2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 04, 2001 8:00 am Secretary of State DOCUMENT # F9800005743 1. Entity Name **GRT CORPORATION** 05-04-2001 90169 033 ***150.00 Principal Place of Business Mailing Address 400 SOUTH EL CAMINO REAL STE 1100 400 SOUTH EL CAMINO REAL STE 1100 SAN MATEO CA 94402-1708 SAN MATEO CA 94402-1708 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 94-3236882 Not Applicable Zip Country \$8.75 Additional Certificate of Status Desired 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 Zip Code City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 3R2E034 (10/00) ☐ Change ☐ Addition ☐ Delete TITLE TITLE BATINOVICH, ANDREW NAME NAME STREET ADDRESS STREET ADDRESS 400 SO. EL CAMINO REAL STE 1100 CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA **EVPCFOAS** ★ Addition TITLE ☐ Delete TITLE XI Change SAUL, STEPHEN R NAME NAME STREET ADDRESS 400 SO. EL CAMINO REAL STE 1100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA SVPGCS TITLE ☐ Delete TITLE X Change X Addition AUSTIN-FRANK-R----NAME STREET ADDRESS STREET ADDRESS 400 SO. EL CAMINO REAL STE 1100 CITY-ST-ZIP CITY-ST-ZIP san mateo ca TITLE X Delete TITLE VΡ X Change ☐ Addition NAME GARNICK, TERRI NAME Daniel Levin STREET ADDRESS 400 SO. EL CAMINO REAL STE 1100 STREET ADDRESS 2430 Sharon Oaks Drive CITY-ST-ZIP CITY-ST-ZIP san mateo ca Menlo, Pärk, CA 94025 TITLE CD ☐ Delete TITLE ☐ Change ■ Addition BATINOVICH, ROBERT NAME NAME STREET ADDRESS 400 SO. EL CAMINO REAL STE 1100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA ☐ Delete TITLE TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-7iP

SIGNATURE:

CITY-ST-ZIP

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank E. Austin, Secretary

4/23/01