2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F98000006853 Aug 15, 2000 8:00 am Secretary of State 1. Entity Name U.S. CONCEPTS, INC. 08-15-2000 90007 022 ***150.00 Principal Place of Business Mailing Address 16 WEST 22ND STREET 16 WEST 22ND STREET NEW YORK NY 10010 NEW YORK NY 10010 AUU/25UU 2. Principal Place of Business 3. Mailing Address 6 WEST 22 No STREET Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 11-3465794 YUEK 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 UNITED CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 9200 SOUTH DADELAND BLVD. SUITE 508 MIAMI FL 33156-0000 City 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) DATE FILE NOW!!! FEE IS \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 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 12. ☐ Change ☐ Addition TITLE ☐ Delete BENFIELD, JOHN P NAME NAME 415 NORTHERN BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **GREAT NECK NY 11021** CITY-ST-ZIP ☐ Addition TITLE Delete TITLE VOS Change BERNARD, DONALD A NAME NAME STREET ADDRESS 415 NORTHERN BOULEVARD STREET ADDRESS CITY-ST-ZIP **GREAT NECK NY 11021** CITY~ST-78 Change Addition ☐ Delete TITLE TITLE AMERSHADIAN, PAUL A NAME NAME 415 NORTHERN BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **GREAT NECK NY 11021** CITY-ST-ZIP CEO **Change** ☐ Addition TITLE ☐ Delete TITLE MURPHY, BRIAN NAME NAME 16 WEST 22ND STREET STREET ADDRESS STREET ADDRESS **NEW YORK NY 10010** CITY-ST-7IP CITY-ST-ZIP PRESIDENT Addition TITLE Delete TITLE Change BRADFORD, BRYEN NAME NAME 16 WEST 22ND STREET STREET ADDRESS STREET ADDRESS **NEW YORK NY 10010** CITY-ST-ZIP CITY-ST-ZIP VS VICE PRESIDENT Change TITLE ☐ Delete TITLE Addition MARTIN, MARCUS NAME NAME STREET ADDRESS 16 WEST 22ND STREET STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

NEW YORK NY 10010

CARDUREIVP-FINANCE

AUG F. YOU

212-366-3414

CR2F034 (5/00)

Florida Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: US Concepts, Inc F98000006853

Gentlemen:

Please accept our check in the amount of \$150.00 in payment of the annual fee for the 2000 Uniform Business Report.

- We never received the original and in speaking with Mr. Mark Corbett of your office he stated that he will waive the penalty.
- Thank you for your cooperation in this matter.

Very truly yours,

Martin C. Marcus Vice President - Finance