FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F99000000337 1. Entity Name

PAMI-FL16 Inc.



DO NOT WRITE IN THIS SPACE

3. 'Mailing Address 2. Principal Place of Business 101 Hudson Street 745 Seventh Avenue Suite Ant # etc. :Suite Apt # etc

FII FD MAY -6 PM 12: 32

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

-5/10/ / 15/10/			•	35 767 7777 77762			
		39th Floor	τ	1			
City & State	<u> </u>	City & State		4. FEI Number	Applied For		
· New York, NY		Jersey Cit	cy, NJ	22-3635572	Not Applicable		
Zip	Country	¦Zip	Country	5. Certificate of Status Desired	\$8.75 Additional		
10019	US	07302	US	5. Certificate of Status Desired	Fee Required		
				7. Name and Address of Current Registered Agent			

DO NOT WRITE IN THIS SPACE

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Спу	Ta:	lla	ha	s	se	e
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable January 1 - May 1 Fee is \$150.00

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9. Election Campaign Financing Trust Fund Contribution,

\$5.00 May Be Added to Fees

After May 1, Fee is \$550.00 Amended UBR is \$61,25 Make Check Payable to Florida Department of State

OFFICERS AND DIRECTORS 10. TITLE TITLE 800018302418 NAME, Yon K. Cho 5/06/03--01090--006 NAME 745 Seventh Avenue STREET ADDRESS STREET ADDRESS CITY-ST-ZIP New York, NY 10019 CITY-ST-ZIP TITLE 3 TITLE NAME Barry J. O'Brien NAME STREET ADDRESS STREET ADDRESS 101 Hudson Street CITY-ST-ZIP Jersey City, NJ 07302 CITY-ST-ZIP TITLE TITLE " Kathryn M. Bopp Flynn NAME NAME-745 Seventh Avenue STREET ADDRESS STREET ADDRESS DO NOT WRITE New York, NY 10019 CITY-ST-ZIP CITY ST-ZIP + TITLE TITLE IN THIS SPACE NAME Jennifer Marre NAME STREET ADDRESS 745 Seventh Avenue STREET ADDRESS New York, NY 10019 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME Joseph J. Flannery NAME STREET ADDRESS 745 Seventh Avenue STREET ADDRESS New York, NY 10019 CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 10 or on an attachment with an address, with all other like empowered.

TITLE :

NAMÉ:

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Christopher S. McKenna

745 Seventh Avenue

New York, NY 10019

Barry J. O'Brien

(201) 524-5430

Davtima Phone 8