FILED **2001 UNIFORM BUSINESS REPORT (UBR)** May 15, 2001 8:00 am Secretary of State **DOCUMENT # G57923** 1. Entity Name 05-15-2001 90145 020 ***150.00 POMA CORPORATION Principal Place of Business Mailing Address 9040 BELVEDERE RD. 9040 BELVEDERE RD. WEST PALM BEACH FL 33411 WEST PALM BEACH FL 33411 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2328497 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required... 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD PLANTATION FL 33324 Zip Code City FI 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. П 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 11. ☐ Change ■ Addition CTD TITLE ☐ Delete WHELAN, PATRICK NAME NAME STREET ADDRESS STREET ADDRESS 1031 -17 ST #5 CITY-ST-ZIP CITY-ST-ZIP SANTA MONICA CA Channe Channe Addition ☐ Delete TITLE TITLE NAME NAME ZAJAC, DAVID T 9040 Belvedere Rd. STREET ADDRESS STREET ADDRESS 17510 SE 55 ST West Palm Beach, FL 33411 CITY-ST-ZIP CITY-ST-ZIP BELLEVUE-WA-98006 **X** Addition ☐ Change Delete TITLE TITLE NAME KATZ, LAWRENCE M NAME STREET ADDRESS STREET ADDRESS 15368 -118 TERR CITY-ST-ZIP CITY-ST-ZIP Jupiter FL 33478 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME ROSENBLATT, HARVEY STREET ADDRESS STREET ADDRESS 175 GREAT NECK RD CITY-ST-7/P CITY-ST-ZIP GREAT NECK NY 11021-3313 Change Addition ☐ Delete TITLE DAVIDOFF, HOWARD NAME STREET ADDRESS STREET ADDRESS 135 E. 57 ST

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

STREET ADDRESS CITY-ST-ZIP

NAME

Sciretar

Thomas Scherzer

9040 Belvedere Road

SIGNATURE:

NEW YORK NY 10022

Thomas Scherzer

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Addition

Change