2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 22, 2000 8:00 am Secretary of State DOCUMENT # M18707 I.R.E. PENSION ADVISORS II, CORP. 05-22-2000 90066 040 ***150.00 Mailing Address Principal Place of Business P O BOX 5403 P O BOX 5403 FT LAUDERDALE FL 33310-5403 FT LAUDERDALE FL 33310-5403 A0063461 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2567622 Not Applicable \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LEVAN, ALAN B. Street Address (P.O. Box Number is Not Acceptable) 1750 EAST SUNRISE BOULEVARD 3RD FLOOR FT LAUDERDALE FL 33310 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change Addition ☐ Delete TITLE TITLE NAME LEVAN, ALAN B NAME STREET ADDRESS STREET ADDRESS 1750 E SUNRISE BLVD THIRD FLOOR CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDAEL FL Change Delete ☐ Addition TITLE TITLE MCKENNY, CARL NAME NAME STREET ADDRESS 1750 E SUNRISE BLVD THIRD FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Addition Change TITLE Delete PERTNOY, EARL NAME NAME STREET ADDRESS 1750 E SUNRISE BLVD THIRD FLOOR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT LAUDERDALE FL ☐ Addition Change TITI F ☐ Delete GILBERT, GLEN R. NAME NAME 1750 E SUNRISE BLVD THIRD FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

GLEN R. GILBERT

Executive Vice President
SIGNATURE AND VEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/2000

Date Daytime Phone #