2001 UNIFORM BUSINESS REPORT (UBR)

Mar 09, 2001 8:00 am Secretary of State **DOCUMENT # M30630** 1. Entity Name R.D. SHAY AND COMPANY INC. 03-09-2001 90042 001 ***600.00 Principal Place of Business Mailing Address 1100 S. FEDERAL HIGHWAY 230 W. MONROE ST. BOYNTON BEACH FL 33435 **SUITE 2810** CHICAGO IL 60606 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 59-2671639 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 CORPORATION COMPANY OF MIAMI Street Address (P.O. Box Number is Not Acceptable) 201 S. BISCAYNE BLVD. 1500 MIAMI CENTER **MIAMI FL 33131** 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) FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Delete TITLE TIT! F ☐ Change ☐ Addition NAME SHAY, RODGER D. NAME STREET ADDRESS STREET ADDRESS 1000 BRICKELL AVE, 7TH FLOOR CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 TITLE ☐ Delete ☐ Change ☐ Addition TITLE SHAY, RODGER D., JR. NAME NAME STREET ADDRESS 1000 BRICKELL AVE, 7TH FLOOR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP --MIAMI FL 33131-- ---TITLE Delete TITLE Change Addition PODRAZA, ROBERT T NAME NAME STREET ADDRESS 230 W. MONROE ST., SUITE 2810 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO FL 60606 TITLE □ Defete TITLE Change ☐ Addition SACHEK, RICHARD NAME NAME STREET ADDRESS 1100 S. FEDERAL HIGHWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33435** ☐ Delete TITLE ☐ Change ☐ Addition BRUCKER, BONNIE NAME NAME STREET ADDRESS 1100 S. FEDERAL HIGHWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33435** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Douting Phone #

FILED