2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

FILED DOCUMENT # M63524 May 22, 2000 8:00 am Secretary of State BANKATLANTIC VENTURE PARTNERS 4, INC. 05-22-2000 90040 037 ***150.00 Principal Place of Business Mailing Address JOHN E. ABDO % JOHN E. ABDO < 1750 E SUNRISE BLVD 1750 E SUNRISE BLVD FT. LAUDERDALE FL 33304-3013 FT. LAUDERDALE FL 33304 3. Mailing Address P. O. Box 5403 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State 65-0017330 Cort Landerdale Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired 33310-540= Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GILBERT, GLEN & FURMAN, JACK A Street Address (P.O. Box Number is Not Acceptable) 1750 E SUNRISE BLVD FT. LAUDERDALE FL 33304 1750 EAST SUNRISE BLVD Zip Code 0 4 FT LAUDERDALE 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 GLEN R. GILBERT **Executive Vice President** SIGNATURE rinted name of registered agent and title if applicable. (NOTF: Registered Agent signature required when reinstating) Signature, type FILE NOW!!! FEE IS \$150.00 9. This corporation is expible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. 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 12. 11. ☐ Addition ☐ Delete TITLE TITLE ABDO, JOHN E. NAME STREET ADDRESS 1750 E SUNRISE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL Delete ■ Addition ☐ Change TITLE TITLE LEVAN, JARETT S NAME NAME STREET ADDRESS STREET ADDRESS 1750 E.SUNRISE BLVD. CITY-ST-7IP FT.LAUDERDALE FL 33304 CITY-ST-ZIP VPTS Addition ☐ Delete TITLE Change TITLE NAME GILBERT, GLEN NAME STREET ADDRESS STREET ADDRESS 1750 E. SUNRISE BOULEVARD CITY-ST-ZIP CITY-ST-7IP FT. LAUDERDALE FL ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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. GLEN R. GILBERT

····Executive Vice President