2001 UNIFORM BUSINESS REPORT (UBR) Apr 18, 2001 8:00 am DOCUMENT # P00000082849 1. Entity Name Secretary of State GREYSTONE INT'L ASSET MANAGEMENT INC. 04-18-2001 90103 001 ***150 00 2901 FLORIDA AVE Suite 5 A0051501 COCONUT GROVE FL 33133 2. Principal Place of Business 3. Mailing Address 2901 FLORIDA AVE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For OCO NUT GROVE 65 1038067 Not Applicable Country **\$8.75** Additional 5. Certificate of Status Desired USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RICHARD V CACERES RICHARD V. CACERES 161 LA POSADA CIRKIE Street Address (P.O. Box Number is Not Acceptable) PONTE VEDRA REACH FL 3/2082 2901 FLORIDA AVE CICOCONUT GROVE 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 RICHORD V. CACERES 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 DIRECTOR ☐ Change ☐ Addition Delete RESIDENT JOHN L BUSH RICHARD V. CACERES NAME 61 SW 91 ST AVE #106 PH 5 STREET ADDRESS 2901 FLORIDA AVE STREET ADDRESS PLANTATION FL 33324 CITY-ST-ZIP CITY-ST-ZIF VICE PRESIDENT Addition Change □ Delete ARTHUR W. ATHAMAS NAME STREET ADDRESS 5253 SW 118 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FL 33330 COOPER CITY Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an officer or director this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this filing does not qualify to indicated on this report or supplemental report is true and accurate and that of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an apdress, with all other like empowered. RICHARDS V. CACERES 4/10/01 805) 444-0530 SIGNATURE AND TYPED OR PRINTED NAMI