2001 UNIFORM BUSINESS REPORT (UBR)

Mar 19, 2001 8:00 am DOCUMENT # P0000094723 **Secretary of State** 1. Entity Name BAYSHORE CONSTRUCTION MGMT. CO. 03-19-2001 90477 022 ***150.00 Principal Place of Business Mailing Address 1 S.E. 3RD AVENUE 1 S.E. 3RD AVENUE SUITE 1940 **SUITE 1940** MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business .3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 65-1047945 City & State City & State Applied For Not Applicable Zip Country Zip 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 FILINGS, INC. Street Address (P.O. Box Number is Not Acceptable) **3732 N.W. 16TH STREET** FT. LAUDERDALE FL 33311-4132 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 it applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change FOUFAS, PLATO NAME NAME 1 S.E. 3RD AVENUE SUITE 1940 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-7IP President ☐ Change Delete TITLE TITLE Derek Lodge one IBM Plaza, Suite 2630 NAME NAME STREET ADDRESS STREET ADDRESS Chicago, IL 40611 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change NAME NAME One IBM Plaza Stute 2030 Chicago, Il 100/011 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Assistant Secretary Charmaine Foutaso TITLE ☐ Delete TITLE Change Addition 7 NAME NAME one IBM Plazor, Swite 2630 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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

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 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