2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPE

May 04, 2001 8:00 am Secretary of State **DOCUMENT # P25483** 1. Entity Name BRCMC, INC. 04-18-2001 90103 018 ****61.25 05-04-2001 90019 026 ***150.00 Principal Place of Business Mailing Address % BLANK, ROME, COMISKY & MCCAULEY WOODLAND FALLS CORPORATE PARK. 1200 N. FEDERAL HWY., STE 417 210 LAKE DR., EAST, SUITE 200 970225 **BOCA RATON FL 33432** CHERRY HILL NJ 08002 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 22-2981580 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LEEDS, MICHAEL H Street Address (P.O. Box Number is Not Acceptable) 1200 N. FEDERAL HIGHWAY STE. 417 **BOCA RATON FL 33432** Zip Code City 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 DATE 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 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 TITLE Change ☐ Delete TITLE RUTTENBERG, FRED A NAME NAME STREET ADDRESS STREET ADDRESS 210 LAKE DR. E. #200 CITY-ST-ZIP CITY-ST-ZIP **CHERRY HILL NJ** ☐ Addition ☐ Change VPD ☐ Delete T1T1 F TITLE LEEDS, MICHAEL H NAME NAME STREET ADDRESS STREET ADDRESS 1200 N. FEDERAL HWY. STE. 417 CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL 33432** Change ☐ Addition TITLE ☐ Delete TITLE NAME weinstein, steven D. NAME STREET ADDRESS STREET ADDRESS 210 LAKE DR. E. #200 CITY-ST-ZIP CITY-ST-ZIP CHERRY HILL NJ ☐ Change ☐ Addition ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Detete TITI F 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 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 pthe like empowered.

856-779-3608

Daytime Phone #