2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED **DOCUMENT # P28235** May 16, 2000 8:00 am Secretary of State 1. Entity Name JV FLORIDA ONE, INC. 05-16-2000 90132 049 ***150.00 Mailing Address Principal Place of Business 730 THIRD AVENUE 730 THIRD AVENUE NEW YORK NY 10017 15/485 NEW YORK NY 10017-3206 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 13-3557420 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** 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, typed or printed name of registered agent and title if applicable DATE (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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change ☐ Addition VD ☐ Delete TITLE TITLE LUIK, JOSEPH W NAME NAME STREET ADDRESS STREET ADORESS 730 THIRD AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10017** Change ☐ Addition ☐ Delete TITLE SOMERS, JOHN A. NAME STREET ADDRESS STREET ADDRESS 730 THIRD AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10017** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME SERLEN, MARK L. NAME STREET ADDRESS STREET ADDRESS 730 THIRD AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10017** ☐ Change ☐ Addition ☐ Delete TITLE TITLE ADAMSKI, RICHARD J. NAME NAME STREET ADDRESS STREET ADDRESS 730 THIRD AVENUE CITY - ST - ZIP CITY-ST-7IP NEW YORK NY 10017 ☐ Delete Change ☐ Addition TITLE TITLE DIGENNARO, PHILIP R NAME NAME STREET ADDRESS STREET ADDRESS 730 THIRD AVENUE CITY-ST-7IP CITY-ST-ZIP **NEW YORK NY 10017** ☐ Change X Addition AS Delete TITLE Secretary LEAHY, EDWARD J NAME NAME SERLEN, MARK L. STREET ADDRESS STREET ADDRESS 730 THIRD AVENUE 730 3rd Avenue CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10017** 13. I hereby certify that the information supplied with this filling 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

Mark Serlen 4/15/00 (212) 916-4256
SIGNATURE AND TYPED ON-RINGED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #