2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P28282 1. Entity Name THE ART INSTITUTES INTERNATIONAL, INC.					<i>*</i>	Jul 18, 2001 8:00 am Secretary of State 07-18-2001 90015 037 ***550.00			
BTH FLOOR PITTSBURGH PA 15222		Mailing Address C/O EMC 300 SIXTH AVE. 8TH FLOOR PITTSBURGH PA 15222 US				E SERVICEN NA VIDAN VIDAN VIDAN FIRMA NIRK RISKA ANDVI OVERH AVEN BIOK ÁTOK VIDAN			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State			4.	FEI Number 25-1119571	 	plied For ot Applicable	
Zip	Country	Zip	Cour	itry	5.	Certificate of Status Desired	\$8.75 Add		
	6. Name and Address of Current R	egistered Agent			7.	Name and Address of New Regis	tered Agent		
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET TALLAHASSEE FL 32301				Street Ac	Idress (P.O. (Box Number is Not Acceptable)			
			City			FL Zip Code			
Tax filing (See criter	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Stat			50.00 of State	te 10. Election Campaign Financing \$5.00 May Be Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S,	. Delete			PRESI PAULO 300S PITTS	DENT DAVID J. DEXTHAVENUE BURGH PA 15222	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCO DRUCKER, MIRYAM L. 300 SIXTH AVE. 8TH FL. PITTSBURGH PA	□ Delete		1	GRIBA 300 S PITT	SURER BLE, KRISTEN H STXTH AVENUE SBURGH PA ISƏR		Addition	
NAME STREET ADDRESS CITY-ST-ZIP	SVTC MCDOWELL, ROBERT L. 300 SIXTH AVE. 8TH FL. PITTSBURGH PA	⊠ Delete			ASSIS CLOVI 300 PITT	TANT SECRETARY ER, KATHLEEN SIXTH AVENUE SBURGH PA 152	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCCE KNUTSON, ROBERT B 300 SIXITH AVE. 8TH FL PITTSBURGH PA	⊠ Delete					☐ Change	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	AS LINDBERG, DEBORAH 1500 OLIVER BUILDING PITTSBURGH PA 15222	**************************************		l l			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COVALESKIE, FRANCIS T 300 SIXTH AVE, 8TH FL PITTSBURGH PA	Delete	ÇITY	IE EET ADDRESS '-ST-ZIP			☐ Change	☐ Addition	
indicated of the cor	certify that the information supplied with to this report or supplemental report is proration or the receiver or trustee empor, or on an attachment with an address, w	true and accurate and that m wered to execute this report a	ıv siana	ture shall ha	ave the same	e legal effect as it made under oath:	that I am an officer	or director 1	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-29-01 412-562-0900 Date Daytime Phone #