2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

6363 WOODWAY, SUITE 1000

HOUSTON TX 77057-1717

P35273 DOCUMENT

1. Entity Name

Principal Place of Business

6363 WOODWAY, SUITE 1000

2. Principal Place of Business

the obligations of registered agent.

HOUSTON TX 77057-1717

Suite, Apt. #, etc.

City & State

Zip

DMC REALTY INVESTMENT GROUP, INC.

Country



FILED Feb 14, 2003 8:00 am Secretary of State

02-14-2003 90204 039 ***150.00

\$8,75 Additional

Zip Code

<u> </u>	☐ CHECK HERE IF MAKING CHANGES	
	4. FEI Number 76_0240124	Applied For
	4. FEI Number 76-0249124	Not Applicable

5. Certificate of Status Desired

7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BAILIN, LAWRENCE J. ONE TAMPA CITY CENTER, SUITE 3300 **TAMPA FL 33601** City

Country

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. I am familiar with, and accept

DATE SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 3R2F034 (10/02) 10. Addition ☐ Change TITLE ☐ Delete TITLE NAMÉ DINERSTEIN, JACK NAME 6363 WOODWAY, SUITE 1000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOUSTON TX CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME WILLIAMS, JOANNE NAME 6363 WOODWAY SUITE 1000 STREET ADDRESS STREET ADDRESS CITY-ST ZIP **HOUSTON TX** CITY-ST-ZIP ☐ Addition Change DVC ☐ Delete DC TITLE NAME DINERSTEIN, T.H. NAME STREET ADDRESS 6363 WOODWAY, SUITE 1000 STREET ADDRESS CITY-ST-ZIP HOUSTON TX CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME CALTAGIRONE, VINCENT T NAME STREET ADDRESS 6363 WOODWAY, SUITE 1000 STREET ADDRESS CITY-ST-ZIP HOUSTON TX CITY-ST-ZIP ☐ Addition Change Change Delete HUSMANN, RANDALL A. NAME NAME STREET ADDRESS 6363 WOODWAY, SUITE 1000 STREET ADDRESS CITY-ST-ZIP HOUSTON TX CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. Thereby 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 procedure or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter in the procedure of the pr changed, or on an attac

SIGNATURE:

CITY-ST-ZIP