2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 16, 2002 8:00 am Secretary of State P37661 DOCUMENT # 1. Entity Name 05-16-2002 90028 047 ***150.00 PHAR-MOR REAL ESTATE, INC. Mailing Address Principal Place of Business 20 FEDERAL PLAZA, WEST 20 FEDERAL PLAZA, WEST P.O. BOX 400, N/A P.O. BOX 400. N/A YOUNSTOWN OH 44501-0400 YOUNGSTOWN OH 44501-0400 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 34-1694974 Not Applicable \$8,75 Additional Country Country \Box 5. Certificate of Status Desired Zip 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 *ax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Addition Change TITLE □ Delete CEO: TITLE NAME ABBEY BUTLER NAME STREET ADDRESS 20 FEDERAL PLAZA WEST STREET ADDRESS CITY-ST-ZIP* YOUNGSTOWN OH 44501 CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete **VPS** TITLE NAME FICARRO, JOHN R NAME STREET ADDRESS 20 FEDERAL PLAZA WEST STREET ADDRESS CITY-ST-ZIP YOUNGSTOWN OH CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE _ _ NAME SCHWARTZ, DAVID M. NAME STREET ADDRESS STREET ADDRESS 20 FEDERAL HWY CITY-ST-7/P YOUNSTOWN OH CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete **VCFO** TITLE NAME SEEKELY, MARTIN S NAME STREET ADDRESS 20 FEDERAL PLAZA WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YOUNGSTOWN OH 44501 Addition ☐ Change ☐ Delete TITLE TITLE NAME SCHWARTZ, M. DAVID NAME STREET ADDRESS 20 FEDERAL PLAZA WEST STREET ADDRESS CITY-ST-ZIP YOUNGSTOWN OH 44501 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME MELVYN J ESTRIN NAME STREET ADDRESS 20 FEDERAL PLZ W STREET ADDRESS CITY-ST-ZIP YOUNGSTOWN OH 44501 CITY-ST-ZIP 13. Thereby 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 other like empowered.

FILED

CR2E034 (9/01)