2000 UNIFORM BUSINESS REPORT (UBR)

Apr 21, 2000 08:00 AM DOCUMENT # **P9200000777** 1. Entity Name **Secretary of State** CLA CANADA, INC. Principal Place of Business Mailing Address C/O UNICAPITAL CORP C/O UNICAPITAL CORP 10800 BISCAYNE BLVD. STE 800 10800 BISCAYNE BLVD. STE 800 MIAMI FL N. MIAMI FL 33161 33161 2. Principal Place of Business 3. Mailing Address C/O UNICAPITAL CORP C/O UNICAPITAL CORF Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 10800 BISCAYNE BLVD, STE 800 10800 BISCAYNE BLVD, STE 800 City & State City & State 4. FEI Number Applied For MIAMI FL MIAMI FL 65-0373551 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 33161 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM SKYWATCH REGISTERED AGENTS, INC. C/O CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. 10800 BISCAYNE BLVD., LAW DEPT. PLANTATION \mathbf{FL} SUITE 800 33324 City 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. 04/21/2000 JANINE E. COX, ASST. SECRETARY Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE JS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be 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 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change X Addition NAME THORNTON SAM STREET ADDRESS STREET ADDRESS 10800 BISCAYNE BLVD., SUITE 800 CITY-ST-ZIP CITY-ST-ZIP MIAMI \mathbf{FL} 33161 TITLE ☐ Delete TITLE ☐ Change X Addition NAME NAME THORNTON STREET ADDRESS STREET ACCRESS 10800 BISCAYNE BLVD., SUITE 800 CITY-ST-ZIF CITY-ST-718 MIAMI FT. 33161 ☐ Delete TITLE TILE ☐ Change **X** Addition NAME NAME LIPPMAN WAYNE STREET ADDRESS 10800 BISCAYNE BLVD., SUITE 800 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI 33161 TITLE ☐ Defete TITLE ☐ Change X Addition NAME NAME CAUFF STUART STREET ADDRESS 10800 BISCAYNE BLVD., SUITE 800 STREET ADDRESS CITY-ST-ZIP MIAMI FL. 33161 CITY-ST-ZIP TITLE DVS TITLE $\mathbf{V}\mathbf{T}$ ☐ Delete X Change ☐ Addition NAME LIPPMAN WAYNE NAME NEW JONATHAN 7101 SW 102ND AVE 10800 BISCAYNE BLVD., SUITE 800 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 33161 CITY-ST-ZIP MIAMI FLTITLE DPT CPD ☐ Delete TITLE ☐ Addition X Change NAME CAUFF STUART NEW ROBERT NAME STREET ADDRESS 7101 SW 102ND AVE 10800 BISCAYNE BLVD., SUITE 800 STREET ADDRESS CITY-ST-ZIP MIAMI 33156 CITY-ST-7/8 MIAMI FL33161

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^{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 other like empowered.

RICHARD C. GILES, VICE PRESIDENT 33 BLEEKER STREET

MILLBURN, NJ 07041

TERI M. TRIMMER, ASST. SECRETARY 10800 BISCAYNE BLVD., SUITE 800

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DANIEL CHAIT, VICE PRESIDENT 10800 BISCAYNE BLVD., SUITE 800

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