2001 UNIFORM BUSINESS REPORT (UBR) FILED May 02, 2001 8:00 am Secretary of State DOCUMENT # P94000015193

1. Entity Name

TRIAD INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

1906 HOLLYWOOD BLVD HOLLYWOOD FL 33020

IIS

C/O TRIK MEXZER ISBOUPMINCX 615 N WABASH AVE

CHICAGO IL 60611

US

ulting Inc.	

05-02-2001 90184 028 ***150.00

3. Mailing Address 2. Principal Place of Business Navigant Cons DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0470715 Not Applicable \$8.75 Additional Country 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 Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code City FL 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 DATE (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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Change ★ Addition PDPD X Delete TITLE TITLE William M. Goodyear SPETZLER, CARL NAME STREET ADDRESS 615 N. Wabash Ave. STREET ADDRESS 2440 SAND HILL ROAD CITY-ST-ZIP Chicago, IL 60611-2713 CITY-ST-ZIP MENLO PARK CA 94025 Change ▼ Addition TITLE VTD Delete TITLE Ben W. Perks NAME STEPTOE, PHILIP NAME STREET ADDRESS 615 N. Wabash Ave. STREET ADDRESS 615 N WABASH AVE CITY-ST-ZIP Chicago, IL 60611-2713 CITY-ST-ZIP CHICAGO IL 60611 Change . Addition TITLE 🔯 Delete VSD TITLE Philip P.Steptoe NAME HILLMAN, JAMES NAME STREET ADDRESS 615 N. Wabash Ave. STREET ADDRESS 615 N WABASH AVE CITY-ST-ZIP Chicago, IL 60611-2713 CITY-ST-ZIP CHICAGO IL 60611 ☐ Addition Change X Delete CD TITLE TITLE NAME SARANOW, MITCHELL NAME STREET ADDRESS STREET ADDRESS 615 N WABASH AVE CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60611 ☐ Change ☐ Addition Delete TITLE n TITLE

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 of 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.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

T/T/F

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-7IP

REED, JOHN

200 WHEELER ROAD

BURLINGTON MA 01803

Philip P. PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND T

Delete

Steptoe

☐ Change

☐ Addition