

11682  
**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90118 016 \*\*\*150.00

**DOCUMENT # P94000022876**

1. Entity Name  
**FC-MIRAMAR, INC.**



Principal Place of Business  
**730 TERMINAL TOWER, 50 PUBLIC SQ  
CLEVELAND OH 44113  
US**

Mailing Address  
**730 TERMINAL TOWER, 50 PUBLIC SQ  
CLEVELAND OH 44113  
US**

2. Principal Place of Business  
**1160 Terminal Tower  
Suite, Apt. #, etc.  
50 Public Square**

3. Mailing Address  
**1160 Terminal Tower  
Suite, Apt. #, etc.  
50 Public Square**

City & State  
**Cleveland, Ohio**

City & State  
**Cleveland, Ohio**

Zip  
**44113**

Country  
**US**

Zip  
**44113**

Country  
**US**

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **34-1770934**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
C/O CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

|                                                |                                                                                              |                                            |
|------------------------------------------------|----------------------------------------------------------------------------------------------|--------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>MONCHEIN, ROBERT F<br/>1100 TERMINAL TOWER, 50 PUBLIC SQ<br/>CLEVELAND OH 44113</b> | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>T<br/>MILLER, SAMUEL H<br/>1100 TERMINAL TOWER, 50 PUBLIC SQ<br/>CLEVELAND OH 44113</b>   | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S<br/>SMITH, THOMAS G<br/>1100 TERMINAL TOWER, 50 PUBLIC SQ<br/>CLEVELAND OH 44113</b>    | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>RATNER, ALBERT B<br/>1100 TERMINAL TOWER, 50 PUBLIC SQ<br/>CLEVELAND OH 44113</b>   | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>RATNER, CHARLES A<br/>1100 TERMINAL TOWER, 50 PUBLIC SQ<br/>CLEVELAND OH 44113</b>  | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>MILLER, SAMUEL H<br/>1100 TERMINAL TOWER 50 PUBLIC S<br/>CLEVELAND OH 44113</b>     | <input checked="" type="checkbox"/> Delete |

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

|                                                |                                                                                                         |                                                                              |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DP<br/>Robert F. Monchein<br/>1160 Terminal Tower<br/>50 Public Square<br/>Cleveland, Ohio 44113</b> | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VT<br/>Samuel H. Miller<br/>1160 Terminal Tower<br/>50 Public Square<br/>Cleveland, Ohio 44113</b>   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S<br/>Thomas G. Smith<br/>1160 Terminal Tower<br/>50 Public Square<br/>Cleveland, Ohio 44113</b>     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** SIGNATURE **SIGNATURE REQUIRED** Samuel H. Miller **President, Treasurer** 4/18/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)