2001 UNIFORM BUSINESS REPORT (UBR) FILED May 11, 2001 8:00 am Secretary of State DOCUMENT # P97000017242 1. Entity Name TEXTOR VENTURES, INC. 05-11-2001 90096 022 ***150.00 Principal Place of Business Mailing Address 777 S. FLAGLER DR 777 S. FLAGLER DR STE 1750 STF 1750 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 3. Mailing Address 2. Principal Place of Business 300 Clematis ST. - Third Floor 300 Clematis St. - Third Fldor DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0737792 Not Applicable West_Palm_Beach,_FL West Palm Beach, FL \$8.75 Additional Zip Country 5. Certificate of Status Desired 33401 33401 USA USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KRASKER, PAUL A ESQ Street Address (P.O. Box Number is Not Acceptable) 625 NORTH FLAGLER DRIVE 9TH FLOOR WEST PALM BEACH FL 33401 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. X Change ☐ Addition Delete TITLE TITLE NAME TEXTOR, JOHN C NAME 300 Clematis Street - Third Floor STREET ADDRESS STREET ADDRESS 777 S. FLAGLER DR STE 1750 CITY-ST-ZIP CITY-SY-7IP WEST PALM BEACH FL 33401 ☐ Addition Change Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITL F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 employered 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 all other like empowered.

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AN

Date Daytime Phone #

Cochrane & Co Certified Public Accountants

650778 pq1000017242

May 1, 2001

2801 Exchange Court West Palm Beach, FL 33409

Telephone (561) 684-9566 Fax (561) 687-3528

Mr. John C. Textor Textor Ventures, Inc. 300 Clematis Street - Third Floor West Palm Beach, FL 33401

> Re: 2001 Uniform Business Report Document #P97000017242

Dear Mr. Textor:

Enclosed is the 2001 Uniform Business Report for Textor Ventures, Inc.. Please sign and date the report where indicated. It will be necessary to include a check in the amount of \$ 150.00 payable to Department of State. Please mail the report with payment on May 1, 2001 to:

> Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

If you have any questions, please do not hesitate to give us a call. A copy of the above form is enclosed for your files.

Sincerely yours,

COCHRANE & CO., P.A.

/di Enclosure