Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 26, 2001 8:00 am Secretary of State DOCUMENT # **P97000050698** THERREL BAISDEN, P.A. 01-26-2001 90064 032 ***158.75 Principal Place of Business Mailing Address SUNTRUST INTERNATIONAL CENTER SUNTRUST INTERNATIONAL CENTER ONE S.E. 3RD AVE. #2400 ONE S.E. 3RD AVE. #2400 りんようする MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0774635 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DANIELS, NICHOLAS M Street Address (P.O. Box Number is Not Acceptable) SUNTRUST INTERNATIONAL CENTER ONE S.E. 3RD AVE, #2400 **MIAMI FL 33131** Zip Code FI 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition STANTON, FRED R NAME NAME STREET ADDRESS ONE S.E. 3RD AVENUE, #2400 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NICHOLAS, DANIELS NAME NAME ONE S.E. 3RD AVENUE, #2400 STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI FL 33131 City-St-ZIP TITLE ☐ Delete TITLE Addition: ☐ Change ELLEN, ROSE NAME STREET ADDRESS ONE S.E. 3RD AVENUE, #2400 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 13. I hereby certify that the information supplied with this filling 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.

THERREL BAISDEN, P.A.

ATTORNEYS AT LAW
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> OF COUNSEL ERIC J. KAPLAN

DAVID DARLOW MARK M. HASNER JONATHAN FEUERMAN ELLEN ROSE FRED R. STANTON

NICHOLAS M. DANIELS

January/9, 2001

CERTIFIED MAIL RETURN RECEIPT REQUESTED

Division of Corporations Uniform Business Report Filings Post Office Box 1500 Tallahassee, Florida 32302-1500

Re: Therrel Baisden, P.A.
Document No. P97000050698
Our File No. 970315

Gentlemen:

Enclosed herewith is the 2001 Uniform Business Report document for the captioned corporation. We enclose our firm check in the amount of \$158.75 to cover the filing fee.

Please return a copy of this letter with your recording date acknowledging the filing of the Uniform Business Report to the undersigned. A self-addressed stamped envelope has been provided for your convenience.

With kindest regards,

Very truly yours,

THERREL BAISDEN, P.A.

Nicholas M. (Daniels

NMD:1c Enc.

W:\Nmd\LTRS\TB-ANN.RPT