2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 03, 2001 8:00 am Secretary of State DOCUMENT # P9700065176 1. Entity Name FPH/RHI MERGER CORP., INC. 05-03-2001 90089 007 ***150.00 Mailing Address Principal Place of Business 501 E. CAMINO REAL PO BOX 5025 CORPORATE OFFICE CORPORATE OFFICE **BOCA RATON FL 33431** BOCA RATON FL 33432 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number 65-0911243 City & State Not Applicable Country \$8.75 Additional Zip Country \Box 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name AMERICAN INFORMATION SERVICES INC. Street Address (P.O. Box Number is Not Acceptable) ONE S.E. THIRD AVE., 28TH FLOOR **MIAMI FL 33131** 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 (NOTE: Registered Agent signature required when reinstating) DATE 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 П Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change TITLE □ Delete TITLE ROCHON, RICHARD C NAME NAME STREET ADDRESS 450 E. LAS OLAS BLVD., #1500 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33301 XX Change ☐ Addition TITLE □ Delete TITLE PIERCE, WILLIAM M NAME NAME 450 E LAS OLAS BLVD, STE 1400 STREET ADDRESS STREET ADDRESS 501 E. Camino Real CITY-ST-7IP CITY-ST-ZIP FT LAUDERDALE FL 33301 Boca Raton, FL 33432 XX Change ☐ Addition □ Delete TITLE TITI F DAURIA. STEVEN M NAME NAME 501 E. Camino Real 450 E LAS OLAS BLVD, STE 1400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33301 Boca Raton, FL CITY-ST-ZIP SVP Change ☐ Addition ☐ Delete TITLE TITLE HANDLEY, RICHARD L NAME NAME 450 E. LAS OLAS BLVD., #1500 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CITY-ST-7IP

Steven M. Dauria

4/26/01

561-447-5300