2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000095487

1. Entity Name

CC3 EQUITY CORPORATION

changed, or on an attachme

SIGNATURE:

Mailing Address Principal Place of Business 222 LAKEVIEW AVE. 17TH FLOOR 222 LAKEVIEW AVE. 17TH FLOOR WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401-6150 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0959410 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 REGSERV CORP. Street Address (P.O. Box Number is Not Acceptable) 222 LAKEVIEW AVE, 17TH FLOOOR WEST PALM BEACH FL 33401 Zio Code City anging its registered office or registered agent, or both, in the State of Florida 8. The above Regserv Corp. SIGNATURE BY (NOTE: Registered Agent signature required when reinstating) Mark Nussbaum, Vice President FILE NOW!!! FEE IS \$150,00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 11. DICEO TITLE Patrick J. Di Salvo | Chan 222 Lakeview Ave, 17th FL Delete TITLE RENDINA, BRUCE A NAME NAME 222 LAKEVIEW AVE, 17TH FLOOR STREET ADDRESS STREET ADDRESS West Palm Beach, FL 33409 CITY-ST-ZIP WEST PALM BEACH FL 33401 CITY-ST-ZIP ☐ Delete TITLE Lawrence B. Juran 222 Lakeview Ave, NAME NAME STREET ADDRESS STREET ADDRESS West Palm Beach, FL 33401 CITY-ST-ZIP CITY-ST-7IP **C**hange Addition ☐ Delete TITLE TITLE NAME NAME Rendina, Bruce A. STREET ADDRESS STREET ADDRESS 222 Lakeview Avenue, 17th Floor CITY-ST-ZIP CITY-ST-ZIP West Palm Beach, FL 33401 TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREFT 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Patrick J. DiSalvo

Vice President

with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

034 (9/99)

FILED

May 04, 2000 8:00 am Secretary of State

05-04-2000 90096 025 ***150.00