FILED

2002 Uniform Business Report (UBR)

SIGNATURE:

Apr 17, 2002 8:00 am § Secretary of State **DOCUMENT #** P99000110373 1. Entity Name Braman Palm Beach, Inc. Principal Place of Business Mailing Address 2060 BISCAYNE BLVD., SECOND FLOOR 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI FL 33137 MIAMI FL 33137 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 65-1050118 Not Applicable Zip Country 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 KRIEGER, STANLEY J Street Address (P.O. Box Number is Not Acceptable) 2060 BISCAYNE BLVD., SECOND FLOOR **MIAMI FL 33137** 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 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, 2002 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE AS CR2E034 (9/01) Delete TITLE X Addition LEIBOWITZ, EDWARD NAME NAME BRANDES, MARC E 2060 BISCAYNE BLVD SECOND FL STREET ADDRESS STREET ADDRESS 2060 BISCAYNE BLVD. 2ND FLR CITY-ST-ZIP **MIAMI FL 33137** CITY-ST-ZIP MIAMI, FL 33137-5024 ☐ Delete TITLE ☐ Addition ☐ Change KRIEGER, STANLEY J NAME NAME 2060 BISCAYNE BLVD SECOND FL STREET ADDRESS STREET ADDRESS MIAMI FL 33137 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition BERNSTEIN, ROBERT NAME NAME 2060 BISCAYNE BLVD SECOND FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33137 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition Braman, Norman NAME 2060 BISCAYNE BLVD SECOND FL STREET ADDRESS STREET ADDRESS MIAMI FL 33137 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ' ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE □ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

YPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STANLEY JAKRIEGER: SECRETARY 4/5/02 305-576-1889 Daytime Phone #