CORPORATION(S) NAME 14) Hallman & & Lowler associates () Profit () Amendment () Merger () Nonprofit () Foreign () Dissolution/Withdrawal () Mark () Reinstatement () Limited Partnership () Annual Report () Other ()LLC () Name Registration (x) Change of RA () Fictitious Name () UCC () Certified Copy () Photocopies () CUS () Call When Ready () Call If Problem () After 4:30 (x) Walk In () Will Wait (x) Pick Up () Mail Out Name 4/2/02 Order#: 5216279 Availability Document kf Examiner Ref#: Updater Verifier W.P. Verifier

> 660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

20000518302; -04/02/02--01022 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Amount: \$

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	the provisions of sections ned corporation organized	•	107.1508, or 617.1508, Florida Statutes tata of New York	,
_	following statement in orde	-	ed office or registered agent, or both, in	Z
•	of the corporation: Hallman	n & Lorber Associates, Inc.		
	_			
2. The maili	ng address of the corporatio	n : 787 7th Avenue, 49th F	Toor, New York, NY 10019	<del></del>
3. Date of in	ncorporation/qualification:	9/25/86	Document number: P11577	<u> </u>
4. The name	and address of the current i	registered agent and off	ice:	
	Corporation Service Compa	ny		
	1201 Hays Street		91.08 41.17	,
	Tallahassee, FL 32301		APR	
5. The name	and address of the new reg	istered agent (if change . O. Box <b>Not</b> Acceptab	d) and/or registered office (if shanged); le)	
	C T Corporation System	· · · · ·	PA Z	D
	c/o C T Corporation System	, 1200 South Pine Island Re	oad, So	
	Plantation, Florida 33324		······································	-
The street ad	ldress of its registered officinged, will be identical.	e and the street addres	s of the business office of its registered	
-	_		board of directors or by an officer so	
144	au L		March 21, 2002	
(Signat	ure of an officer, chairman or vice of	chairman of the board)	(Date)	
Hillary	England, Vice Pr (Printed or typed name an	esident		
	named as registered agen I hereby accept the appoit ee to comply with the prov e of my duties, and I am fan		of process for the above stated rent and agree to act in this capacity. lative to the proper and complete the obligation of my position as	
By:	20/20		4/1/00	_
	(Signature of Registered Agent)		(1) ates	
lf signing on be		ARD GWISDALLA		
	(Typed or Printed Name) (Typed or Printed Name)	ant Vice President	(Capacity)	
	* * *	FILING FEE: \$35.00	***	
CR2E045(9/00)				
	DIVISION OF CORPORATIONS	P.O. Box 6327	TALLAHASSEE, FL 32314	

FL006 - 09/17/01 C T System Online