

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
 05-03-2001 90002 039 ***150.00

DOCUMENT # P27939

1. Entity Name
DATASCOPE CORP.

Principal Place of Business Mailing Address
14 PHILIPS PARKWAY 14 PHILIPS PARKWAY
MONTVALE NJ 07645 MONTVALE NJ 07645

2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **13-2529596** Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 _____ DATE _____
 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 Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAPER, LAWRENCE 14 PHILLIPS PKWY MONTVALE NJ	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPS PITKOWSKY, MURRAY 14 PHILLIPS PARKWAY MONTVALE NJ	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOODMAN, LEONARD 14 PHILIPS PARKWAY MONTVALE NJ 07645	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SOUTHARD, DONALD 14 PHILIPS PARKWAY MONTVALE NJ	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GOODMAN, LEONARD S 14 PHILIPS PARKWAY MONTVALE NJ 07645	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HAINES, TIMOTHY 14 PHILIPS PARKWAY MONTVALE NJ 07645	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/1/2001 (201)381 9100
 Date Daytime Phone #

Leonard S. Goodman Vice President

CR2E034 (10/00)