

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

01 MAR 20 AM 8:36

SECRETARY OF STATE
TALLAHASSEE FLORIDA

29/1/3

DOCUMENT # 79500003447

1. Entity Name

Total Gas & Electric, Inc.

Principal Place of Business

Mailing Address

2101 N. Andrews Avenue
Suite 104
Ft. Lauderdale, FL 33311

Same

2. Principal Place of Business

2101 N. Andrews Avenue

3. Mailing Address

Same

Suite, Apt. #, etc.

104

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale, FL

City & State

4. FEI Number

65-0584022

Applied For

Not Applicable

Zip

33311

Country

Broward

Zip

Country

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

Phillip Baratz
2101 N. Andrews Avenue
Suite 104
Ft. Lauderdale, FL 33311

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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered agent signature required when re-registering)

DATE

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 March 2001 Fee will be \$200.00

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-STATE-ZIP	☐ Delete
	see attached rider			
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change ☐ Addition

100003889021

06902

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, and all other like empowered.

SIGNATURE:

Alan Shapiro, Assistant Secretary

(212) 977-9700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR20034 (11/00)

5

42

pg 2 of 3

OFFICER/DIRECTOR INFO.

Irik P. Sevin
CEO/Chairman

450 Park Avenue
New York, NY 10022

Phillip Baratz
President and Director

2101 N. Andrews Avenue, 104
Ft. Lauderdale, FL 33311

Richard Rudden
Director

2101 N. Andrews Avenue, 104
Ft. Lauderdale, FL 33311

George Leibowitz
Treasurer

2187 Atlantic St.
Stamford, CT 06902

Audrey L. Sevin
Secretary

2187 Atlantic St.
Stamford, CT 06902

Alan Shapiro
Assistant Secretary

666 Fifth Avenue, 28th Floor
New York, NY 10103



pg 3 of 3

ACCOUNT NO. : 072100000032

REFERENCE : 083596 4301811

AUTHORIZATION : *Patricia Pizzini*

COST LIMIT : \$ 150.00

ORDER DATE : March 19, 2001

ORDER TIME : 1:21 PM

ORDER NO. : 083596-025

CUSTOMER NO: 4301811

CUSTOMER: Frank Lewandoski, Legal Asst
Phillips, Nizer, Benjamin,
666 Fifth Avenue

New York, NY 10103-0084

ANNUAL REPORT FILING

NAME: TOTAL GAS & ELECTRIC, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: JEANINE REYNOLDS- Ext. 1133

EXAMINER'S INITIALS:

[Handwritten Signature]

RECEIVED
01 MAR 20 PM 2:30
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA