2000 UNIFORM BUSINESS REPORT (UBR)

		<u>-</u>			7			
DOCU 1. Entity Nam	MENT # M9600	00000179			F		eu en	
HUDSON GENERAL LLC					FILED SECRETARY OF STATE DIVISION OF CORPORATIONS			
Principal Place of Business Mailing Address					00 FEB - 1 PM 4: 17			
111 GREAT NECK ROAD 111 GREAT NECK ROAD GREAT NECK NY 11022 GREAT NECK NY 11021-5402								
GREAT NEON	111 11022	CHEAT NEON INT TIDE!	J-102			I OL a in dia m erke na dol ma ek	######################################	1871 (18818 (1811 1981)
Principal Place of Business 3. Mailing Address								
· ·								
Suite, Apt.	#, etc.	Suite, Apt. #, etc	Suite, Apt. #, etc.			DO NOT WRITE	IN THIS SPACE	
City & State		City & State			4. FEI Number	11-3319570		Applied For Not Applicable
Zip Country		Zip Coun		itry	5. Certificate of	of Status Desired	□ \$5.00 Fee Requ	Additional
• 1	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and	Address of New Rec		. ÷ •
				_Name		-4		** =
C T CORPORATION SYSTEM				Street Address (P.O. Box Number is Not Acceptable)				
1200 SOUTH PINE ISLAND ROAD				Street Address (P.O. Box Number	is Not Acceptable)	٠	
PLANTATI	ON FL 33324							
-)			City			FL Zip C	Code
8. The above	named entity submits this statement for	r the purpose of changing its	register	ed office or register	red agent, or both	, in the State of Florid	da.	
SIGNATURE							· · · ·	
	Signature, typed or printed name of registered agent a	and title if applicable. (NOT	E: Registere	d Agent signature required	d when reinstating)		DATÉ	
	1	Ell E N	OWILL	FEE IS \$50.00				
		Make Check Pa			of State			
9.	MANAGING MEMBE	 FRS/MEMBERS	10.			ADDITIONS/C	HANGES	
TITLE	MGRM	Delete	TITL	E			Chang	ge 🗌 Addition
MAME	HUDSON GENERAL CORPORATI		NAM	E		^		_
STREET ADDRESS	111 GREAT NECK ROAD		STRI	ET ADORESS	\wedge	4 /)		
CITY-ST-ZIP	GREAT NECK NY 11022		CITY	-\$T-ZIP	- 1	V /		
TITLE	MGRM	☐ Delete	TITL	į.		N. C.	Chan	ge 🗌 Addition
NAME	LAGS (USA), INC.		MAM	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	1640 HEMPSTEAD TPKE EAST MEADOW NY			- ST- ZIP				
TITLE	LAST MICADON IVI	Delete	TITL	.			Chang	ge 🗌 Aukültion
MAME			MAM	·	6	00003	12312	63
. \$TREET ADDRESS. CITY-\$T-ZIP	The same of the sa	** ** ** **	` # -	ET ADDRESS - ST-ZIP	*	-7 -02/03 *****	\NO01093	3009. ↓ **50.00
TITLE		☐ Delete	mu		-		Chan	
NAME AVDITE LIBERTOR			HAM	E ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	-			- ST- ZIP				
TITLE		Deleta	TITL				Chan	ge 🔲 Addition
MAME			NAM	1 .				
STREET ADDRESS	Programme			ET ADDRESS				
CÎTY- ST-ZIP	, १९४८ जे ११३ अफ १८४४ वर्ष । १८४७ वर्ष	· • · · · · · · · · · · · · · · · · · ·	CITY	- \$1 - ZIP				
TITLE	The state of the s	☐ Delete	TITL	1			Chan	pe 🗌 Addition
NAME STREET ADDRESS			NAM ATRI	E Et address				
CITY-81-ZIP				- \$T-ZIP		<i>1</i>		
11. I hereby	pertify that the information supplied with	this filing does not qualify for	r the exe	mption stated in Se	ection 119.07(3)(i)	, Florida Statutes. I fi	urther certify that the	ne information
ındicated İlmited lia	on this report is true and accurate and ibility company or the receiver or trustee	tnat my signature shall have empowered to execute this	report as	e legal eπect as if r s required by Chap	nade under oath; iter 608, Florida St	uiat i am a managin atutes.	g member or man	ager or the