

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2001 8:00 am
Secretary of State

01-27-2001 90072 040 ***150.00

DOCUMENT # 525803

1. Entity Name

GLOBAL DEFENSE PRODUCTS INC.

Principal Place of Business

**38-01 23RD AVE.
 ASTORIA NY 11105
 US**

Mailing Address

**3801 23RD AVENUE
 ASTORIA NY 11105
 US**

2. Principal Place of Business

**Marine View Plaza, 310
 Hoboken, NJ 07030**

3. Mailing Address

**P.O. Box 533
 New York, NY 10011**

Suite, Apt. #, etc.

310

Suite, Apt. #, etc.

City & State

Hoboken, NJ

City & State

New York, NY

4. FEI Number

13-2888522

Applied For

Not Applicable

Zip

07030

Country

USA

Zip

10011

Country

USA

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

**XL CORPORATE SERVICES, INC.
 101 EAST COLLEGE AVENUE
 P. O. BOX 1752
 TALLAHASSEE FL 32302**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 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 **P** ☐ Delete
 NAME **FASSOULIS, S.G.**
 STREET ADDRESS **20 WATERSIDE PLAZA**
 CITY-ST-ZIP **NY NY 10010**

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

TITLE **VD** ☒ Delete
 NAME **THOMPSON, ROBERT C**
 STREET ADDRESS **110 E 23RD ST**
 CITY-ST-ZIP **NY NY 10010**

TITLE ☒ Change ☐ Addition
 NAME **Director**
 STREET ADDRESS **Joseph Ceva**
 CITY-ST-ZIP **757 Rolling Hill Drive**
River Vale, NJ 07675

TITLE **SD** ☒ Delete
 NAME **SEFERIAN, DINO A.**
 STREET ADDRESS **3 AVDA. DE MOLINA**
 CITY-ST-ZIP **MADRID SPAIN**

TITLE ☒ Change ☐ Addition
 NAME **Secretary & Director**
 STREET ADDRESS **Larry Thompson**
 CITY-ST-ZIP **79 Liz's Way**
Martinsburg, WV 25401

TITLE **D** ☒ Delete
 NAME **KANE, MICHAEL**
 STREET ADDRESS **84-09 35TH AVE**
 CITY-ST-ZIP **JACKSON HEIGHTS NY 11372**

TITLE ☐ Change ☐ Addition
 NAME **Director**
 STREET ADDRESS **Carole Dean**
 CITY-ST-ZIP **20 Waterside Plaza, 33A**
New York, NY 10010

TITLE **VD** ☐ Delete
 NAME **CHLADEK, JAMES**
 STREET ADDRESS **20 WATERSIDE PLAZA**
 CITY-ST-ZIP **NEW YORK NY 10010**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

S.G. FASSOULIS, PRESIDENT

1/18/01

(201) 992-1800

Date

Daytime Phone #

CR2E034 (10/00)