

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91614 046 ***150.00

DOCUMENT # 664839

1. Entity Name

INTERNATIONAL PROGRAM CONSULTANTS INC.

Principal Place of Business

2000 ISLAND BLVD

#1009

AVENTURA FL 33160-4960

Mailing Address

52 EAST END AVENUE

NEW YORK NY 10028

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2052083

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KAGAN, SEYMOUR N

2000 ISLAND BLVD

#1009

VENTURA FL 33160

7. Name and Address of New Registered Agent

Name **KAGAN, MILDRED**

Street Address (P.O. Box Number is Not Acceptable)

2000 ISLAND BLVD

#1009

City

AVENTURA

FL

Zip Code

33160

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 **MILDRED KAGAN VTD**

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

(NOTE: Registered Agent signature required when reinstating)

5/5/02
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, 2002 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD KAGAN, RUSSELL J 2000 ISLAND BLVD #1009 AVENTURA FL 33160-4960	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KAGAN, SEYMOUR N 2000 ISLAND BLVD #1009 AVENTURA FL 33160-4960	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD KAGAN, MILDRED 2000 ISLAND AVE AVENTURA FL 33160-4960	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V D KAGAN, MICHAEL 52 EAST END AVENUE 23-A NEW YORK, NEW YORK 10028	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MINDOLI, LORENZO 24 YARMOUTH ROAD RODWAYTON, CT 06853	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAGAN, PHILLIP 3713 MEDLO DRIVE BALTIMORE, MD 21215	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, EVAN 21300 NE 19th Avenue MIAMI, FLORIDA 33179	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/02
Date

305-936-8009
Daytime Phone #

CR2E034 (9/01)

435453

Page 1 of 2

Attachment

664839

Subj: RE: UBR filing help
 Date: 5/8/02 1:18:48 PM Eastern Daylight Time
 From: corphelp@mail.dos.state.fl.us (corphelp)
 To: TVIPC@aol.com ('TVIPC@aol.com')

You were not charged, and your report was not filed. You will need to submit a completed hardcopy report form along with a check and a letter of explanation to our office. Please state in the letter that you attempted to file online before May 1st but were unsuccessful. You should not be charged the late fee if you follow these instructions.

If you need a form, you may obtain one from our website. Uniform business reports can be downloaded or ordered to be received by mail from our webpage at www.sunbiz.org. Click on "Obtain Filing Forms": Choose "Download Forms" - or - "Forms By Mail". If you choose "Download Forms," on the next page select "Florida Corporations (Profit and NonProfit)" and then select "Profit Uniform Business Report/Annual Report" or "NonProfit Uniform Business Report/Annual Report." If you choose "Forms By Mail", fill out the request form and select whichever form(s) you need. Click on "SUBMIT". We will get your request and fill it promptly.

5/8/02

Jennifer
 Internet Access

Gentlemen!

Please accept my
 application and waive
 the late fee due to
 problems online as
 listed here.

May, 7, 2002

Gentlemen:

Thank you.

Re: INTERNATIONAL PROGRAM CONSULTANTS, INC.
 DOCUMENT # 664839
 Electronic Code 0612

I filed this UBR on line April 9, 2002 at 7:12 pmEST with a tracking confirmation and credit card payment number: 300005224493

The charge has yet to appear on the credit card and I am concerned when I check the status.

Could you please review your files and advise what the status is of this filing.

Very truly yours,

Russell J. Kagan
 President

Russell J. Kagan
 PRESIDENT