## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # 843552

1. Entity Name

## **NEEDMORE CORPORATION**



FILED Apr 11, 2003 8:00 am Secretary of State
04-11-2003 90225 007 ***150.00

			OO WE TO			
Principal Plac	e of Business	Mailing Address				
150 E 57TH STREET		150 E 57TH STREET				
SUITE 16-E	INCL	SUITE 16-E				
• • • • • • • • • • • • • • • • • • • •	v 10022	NEW YORK NY 10022		1 100101 15111 01000 11101 ECIDI ALIFO 1101 0	INII ATAIN A1841 AINIE BESTE A1841 (SA)	
NEW YORK NY 10022						
US 2. Principal Place of Business		3. Mailing Address				
2. Thirdpart acc of business						
Suite, Apt. #, etc. Suite, Apt. #, etc.				_		
ound, ript.	11, 510.	ouns, ript. #, etc.		CHECK HERE IF MAKING CHANGES		
03. 9 0		City & State		4. FEI Number	Applied For	
City & State		City & State		13-2996677	Not Applicable	
Zip Country		Zip · Country		10 200011	<del></del>	
ΖIÞ	Country	Zip ,	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
		-t Devistance & court	<u> </u>	7 Name and Address of Nam Davista		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent						
THE PREN	ITICE-HALL CORPORATION SYS	TEM INC.	Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
1201 HAY	S STREET					
SUITE 105			e e	•		
	, ISEE FL 32301		City		Tip Code	
IALLAHAS	DEE FL 32301	, " <u>-</u>	City	•	FL Zip Code	
8. The above	named entity submits this statement	for the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida.	I am familiar with, and accept	
	tions of registered agent:	, , , , ,	Ü		•	
SIGNATURE	Signature, typed or printed name of registered age				ATE	
	Signature, typed or printed name of registered age	nt and title it applicable. (NOTE	E: Registered Agent signature requ	uired when reinstating)	AIE	
F	ILE NOW!!! FEE IS \$150.00	ĺ		6 Flanting Committee Figure	05.00	
Afte	r May 1, 2003 Fee will be \$550.00	0		<ol> <li>Election Campaign Financing Trust Fund Contribution.</li> </ol>	9 <b>\$5.00</b> May Be ☐ Added to Fees	
Make Check	Payable to Florida Department	of State		Trust Fond Contribution.	Added to rees	
10.	OFFICERS AN	D DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 11	
TITLE	VST	Delete	TITLE		☐ Change ☐ Addition	
NAME	FUNK, HELENE	_ Delete	NAME			
STREET ADDRESS	150 E 57TH STREET SUITE 16-	Ē	STREET ADDRESS			
	NEW YORK NY 10022	<b>L</b>	CITY-ST-ZIP			
	INEW TORK IN TOUCE		<del></del>			
TITLE	<u> V                                    </u>	☐ Delete	TITLE		Change Addition	
	MOTTA, ROSE ANNE M	_	NAME		ſ	
STREET ADDRESS	150 e 57th street suite 16-1	E	STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10022		CITY-ST-ZIP			
TITLE	PD	Delete	TITLE CLES PARE	المماليسية أأأأ المالية	Change	
NAME	LAGATTA, JOHN H O		NAME		1	
STREET ADDRESS	50 WEST LIBERTY STREET		STREET ADDRESS		Ì	
	RENO NV 89501		CITY-ST-ZIP			
TITLE		Delete	TITLE		Change Addition	
NAME			NAME			
STREET ADDRESS			STREET ADDRESS		ł	
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE	79.84	☐ Delete	TITLE		Change Addition	
NAME -		المارين بي	NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		Change Addition	
NAME			NAME .			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP	<del></del>		
40 Iborol	and the standard and a second and a second s	de april 200 - Laboratorio de la composición dela composición de la composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición dela composició	AND CONTRACTOR OF STREET	Control 440 07(0)(). Electric Occasion 150 9	and the state of t	

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 10 or Block 11 if changed, or on an attackment with an address, withall other like empowered.

SIGNATURE:

212-75/6052