

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 844182**

1. Entity Name

PB LEASING CORPORATION**FILED****Mar 06, 2001 8:00 am**
Secretary of State

03-06-2001 90010 034 ***150.00

Principal Place of Business

**WORLD HEADQUARTERS
C/O CORPORATE TAX 61-01
STAMFORD CT 06926-7700**

Mailing Address

**WORLD HEADQUARTERS
C/O CORPORATE TAX 61-01
STAMFORD CT 06926-7700**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **06-1012933**

Applied For

Not Applicable

Zip

Country

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 **CRITELLI, MICHAEL J**
STREET ADDRESS **39 SHIELDS RD**
CITY-ST-ZIP **DARIEN CT**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **D** ☒ Delete
NAME **RIGGS, DOUGLAS A.**
STREET ADDRESS **18 WEIR FARMS RD**
CITY-ST-ZIP **RIDGEFIELD CT**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **S** ☐ Delete
NAME **CORN, AMY C.**
STREET ADDRESS **8 COLONIAL CT.**
CITY-ST-ZIP **NEW CANAAN CT**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **T** ☐ Delete
NAME **HENOCK, ARLEN F.**
STREET ADDRESS **44 TALMADGE LANE**
CITY-ST-ZIP **STAMFORD CT**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **AS** ☐ Delete
NAME **NARCISSE, ROBBIE**
STREET ADDRESS **150 WEST END AVE - APT 14R**
CITY-ST-ZIP **NEW YORK NY**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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

ARLEN F. HENOCK
TREASURER

Date

2/27/01
(203) 351-7652

Daytime Phone #

CR2E034 (10/00)

PB LEASING CORPORATION

OFFICERS AND DIRECTORS

Attachment
844182

Terms of Office 5/00-5/2001

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
Michael J. Critelli	President SS#: 064-40-4188	39 Shields Rd. Darien, CT 06820
Amy C. Corn	Secretary SS#: 086-46-4571	8 Colonial Ct. New Canaan, CT 06940
Robbie Narcisse	Assistant Secretary SS#: 526-41-4016	150 West End Ave., Apt. 14R New York, NY 10003
Arlen F. Henock	Treasurer SS#: 075-46-8919	44 Talmadge Ln. Stamford, CT 06905

DIRECTORS

Michael J. Critelli	39 Shields Rd. Darien, CT 06820
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Business Address:
PB Leasing Corporation
1 Elmcroft Rd.
Stamford, CT 06926-0700