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

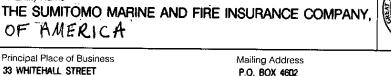
## **DOCUMENT #** 847119



**FILED** Mar 20, 2003 8:00 am Secretary of State

03-20-2003 90098 047 \*\*\*150.00

1.	Enti	itv Na	me			•	•	•	•	•			
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			ME							•		OOM 7417	•





WARREN NJ 07059

บร 2. Principal Place of Business 3. Mailing Address 5 INDEPENDENCE BLYD IN DEPENDENCE Suite, Apt. #, etc.



CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 22-3818012 WARREN, NJ WARLEN Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent INSURANCE COMMISSIONER OF FLORIDA

THE CAPITOL BUILDING **TALLAHASSEE FL 32301** 

Name	·			
Street Address	s (P.O. Box Numb	per is Not Accept	able)	···
	- 140.00	· ·		

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. I am familiar with, and accept the obligations of registered agent.

City

SIGNATURE

26TH FLOOR

NEW YORK NY 10004-3614

Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00

(NOTE: Registered Agent signature required when reinstating)

DATE

After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Zip Code

10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition YOSHIDA, KOJI NAME NAME STREET ADDRESS 33 WHITEHALL STREET, 26TH FLOOR STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10004-3614 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STANHOPE, LEE J STREET ADDRESS 15 INDEPENDENCE BLVD STREET ADDRESS CITY-ST-ZIP WARREN NJ 07059-0602 CITY-ST-ZIP TITLE SECRETARY Delete TITLE ☐ Change ☐ Addition SAITO HISATOSHI NAME MASAHIKO, ANDO - -NAME STREET ADDRESS 15 INDEPENDENCE BLVD STREET ADDRESS 15 WOEPENDENCE BLYD CITY-ST-ZIP WARREN NJ 07059 CITY-ST-ZIP WARREN NO 07059 TITLE VD Delete TITLE ☐ Change ☐ Addition NAME MILLER. ROBERT NAME STREET ADDRESS 15 INDEPENDENCE BLVD STREET ADDRESS CITY-ST-7IP WARREN NJ 07059 CITY-ST-ZIP THILE ☐ Delete TITLE ☐ Channe ☐ Addition NAME VOPELIUS, WILLIAM A NAME STREET ADDRESS 15 INDEPENDENCE BLVD. STREET ADDRESS CITY-ST-ZIP WARREN NJ 07057-0602 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME FARRELL, JOSEPH L NAME STREET ADDRESS 15 INDEPENDENCE BLVD. STREET ADDRESS

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

WARREN NJ 07059-0602

CITY-ST-ZIP

SIGNATURE REQUIRED