

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0005365 AT

DOCUMENT # B96000000187



1. Entity Name
VIDEO MONITORING SERVICES OF AMERICA, LIMITED PA
RTNERSHIP

Principal Place of Business
330 WEST 42ND STREET
NEW YORK NY 10036

Mailing Address
330 WEST 42ND STREET
NEW YORK NY 10036

FILED
03 JAN 30 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2003

4. FEI Number 13-3889971

☒ 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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

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

DATE

9. Capital Contributions as Shown on record. \$335,024.00

10. Amount of Capital Contributions in FLORIDA to date. 323,067.00

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P11921
NAME VIDEO MONITORING SERVICES OF AMERICA, INC.
STREET ADDRESS 330 WEST 42ND STREET
CITY-ST-ZIP NEW YORK NY 10036

STREET ADDRESS

CITY-ST-ZIP

700011197947
01/30/03--01012--002 **535.00

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STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

PETER P. WENGRIN 1/16/02 (212) 736-2010

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE