

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2001 8:00 am
Secretary of State
04-18-2001 90011 006 ***150.00

0574594

DOCUMENT # F00000001302**1. Entity Name**
SIVENTO INC.**Principal Place of Business****Mailing Address****65 CHALLENGER ROAD**
RIDGEFIELD PARK NJ 07660**65 CHALLENGER ROAD**
RIDGEFIELD PARK NJ 07660**2. Principal Place of Business****379 Interpace Parkway**

Suite, Apt. #, etc.

Parsippany, NJ

City & State

07054-0677

Zip

Country

3. Mailing Address**379 Interpace Parkway**

Suite, Apt. #, etc.

Parsippany, NJ

City & State

07054-0677

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **63-1188558**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional**
Fee Required**6. Name and Address of Current Registered Agent****CORPORATION SERVICE COMPANY**
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**7. Name and Address of New Registered Agent**

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****TITLE** **PCEO** ☐ Delete
NAME **OWINS, RICHARD**
STREET ADDRESS **65 CHALLENGER ROAD**
CITY-ST-ZIP **RIDGEFIELD PARK NJ 07660****TITLE** **CFO** ☒ Delete
NAME **SIGG, BRIAN J**
STREET ADDRESS **220 DAVIDSON ROAD**
CITY-ST-ZIP **SOMERSET NJ 08873****TITLE** **V** ☐ Delete
NAME **ANDERSON, ROY**
STREET ADDRESS **65 CHALLENGER ROAD**
CITY-ST-ZIP **RIDGEFIELD PARK NJ 07660****TITLE** **T** ☐ Delete
NAME **SOLOMOWITZ, MITCHELL**
STREET ADDRESS **220 DAVIDSON AVENUE**
CITY-ST-ZIP **SOMERSET NJ 08873****TITLE** **SD** ☒ Delete
NAME **PARNELL, GEORGE F.A.**
STREET ADDRESS **220 DAVIDSON AVENUE**
CITY-ST-ZIP **SOMERSET NJ 08873****TITLE** **D** ☐ Delete
NAME **GAMON, NORBERT**
STREET ADDRESS **WEISSFRAUENSTRASSE 9, D-60311**
CITY-ST-ZIP **FRANKFURT AM MAIN, GERMANY****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11****TITLE** **PCEO** ☒ Change ☐ Addition
NAME **Owins, Richard**
STREET ADDRESS **379 Interpace Parkway**
CITY-ST-ZIP **Parsippany, NJ 07054-0677****TITLE** **D** ☐ Change ☒ Addition
NAME **Burke, Andrew J.**
STREET ADDRESS **379 Interpace Parkway**
CITY-ST-ZIP **Parsippany, NJ 07054-0677****TITLE** **V** ☒ Change ☐ Addition
NAME **Anderson, Roy**
STREET ADDRESS **379 Interpace Parkway**
CITY-ST-ZIP **Parsippany, NJ 07054-0677****TITLE** **T** ☒ Change ☐ Addition
NAME **Solomowitz, Mitchell**
STREET ADDRESS **379 Interpace Parkway**
CITY-ST-ZIP **Parsippany, NJ 07054-0677****TITLE** **DS** ☐ Change ☒ Addition
NAME **Taylor, Dennis J.**
STREET ADDRESS **379 Interpace Parkway**
CITY-ST-ZIP **Parsippany, NJ 07054-0677****TITLE** ☐ 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

Date

Daytime Phone #

CR2E034 (10/00)