2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3. Mailing Address

Suite, Apt. #, etc.

City & State

3 EAST 54TH STREET **NEW YORK NY 10022**

F00000002576 DOCUMENT

1. Entity Name TOURNEAU EXPRESS, INC.

Principal Place of Business

2. Principal Place of Business

3 EAST 54TH STREET

NEW YORK NY 10022

Suite, Apt. #, etc.

City & State

SIGNATURE



FILED Jan 29, 2003 8:00 am Secretary of State

01-29-2003 90136 030 ***150.00

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CHECK HERE IF MAKING CHANGES	
Et Number	Applied For
13-4054582	Not Applicable
Certificate of Status Desired \$8.75 Additional	

NATIONAL CORPORATE RESEARCH, LTD., INC. 103 N. MERIDIAN STREET TALLAHASSEE FL 32301-0000

6. Name and Address of Current Registered Agent

Country

Street Address (P.O. Box Number is Not Acceptable)

5. Certificate of Status Desired

4.

Zip Code

Fee Required

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.

Country

Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.

7. Name and Address of New Registered Agent

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE Change Addition **PCD** NAME WEXLER, ROBERT J NAME STREET ADDRESS STREET ADDRESS 131 LEXINTON AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10016** ☐ Delete Change Addition NAME NAME WEXLER, DAVID STREET ADDRESS. STREET ADDRESS 184-BAY-DRIVE CITY-ST-ZIP CITY-ST-ZIF Woodmere ny 11584 TITLE TITLE ☐ Addition ☐ Delete NAME NAME FRISHWASSER, DANIEL STREET ADDRESS STREET ADDRESS 52 PADDINGTON ROAD CITY-ST-ZIP CITY-ST-7IP SCARSDALE NY 10583 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME SALTZ, FRAN STREET ADDRESS STREET ADDRESS **6 MINDY COURT** CITY-ST-ZIP CITY-ST-7IP Attingtown ny 11560 TITLE Delete TITLE Change Addition NAME NAME SILVERMAN, DAVID STREET ADDRESS STREET ADDRESS 2000 LAKE END ROAD CITY-ST-ZIP CITY-ST-ZIP MERRICK NY 11566 ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information plied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information al 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 ustee endowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supple of the corporation or the receiv changed, or on an attachme