

2001 UNIFORM BUSINESS REPORT (UBR)

Page 1 of 2

DOCUMENT # F00000002936

1. Entity Name

INTERACTIVE ELEMENTS INCORPORATED

Principal Place of Business

342 MADISON AVE
NEW YORK NY 10173

Mailing Address

342 MADISON AVE
NEW YORK NY 10173

FILED

01 SEP 20 PM 4:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

13-2681188

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLUMBERGEXCELSIOR INC.
4435 OLD WINTER GARDEN ROAD
ORLANDO FL 32811

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-STATE-ZIP
PSC
GILBERT, SUSAN
545 WEST END AVENUE
NEW YORK NY 10024

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
BONI, EDMOND
525 GILBERT AVE
HAMDEN CT 06514

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
SMITH, JUNE
25 GRAY ST
BOSTON MA 02118

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
WONG, CECILIA
8 FANEUIL HALL MARKETPLACE
BOSTON MA 02109

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
JONES, WILLIAM
42 ELIZABETH ST
NEW HAVEN CT 06511

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
300004610689
-09/25/01--01083--011
****150.00 ****150.00

☐ Change ☐ Addition

TITLE
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CITY-STATE-ZIP

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STREET ADDRESS
CITY-STATE-ZIP

☐ Change ☐ Addition

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: X *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR03034(B/01)

IVES & SULTAN, LLP
Certified Public Accountants

100 Crossways Park Drive West, Woodbury, NY 11797-2012 • Tel: 516-496-9500 • Fax: 516-496-9508

Circle 5 Designation

September 18, 2001

Florida Department of State
Division of Corporation
PO Box 1500
Tallahassee, FL 32302-1500

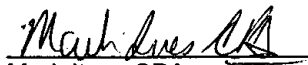
RE: Interactive Elements Inc.
342 Madison Avenue
New York, NY 10173
Reference #F00000002936

Ladies & Gentlemen:

We are communicating with you at the request of the above referenced client of this office. We have herewith enclosed check #6566 in the amount of \$150 for payment of the annual filing fee. This communication is to respectfully request abatement of the \$400 late fee. The taxpayer was unaware of the filing fee required when they filed the report. All future reports will be timely filed with the proper filing fee.

Thank you for your consideration of this matter.

Sincerely,


Mark Ives, CPA

MI:dgint0918.01

Enc.

cc: R. Cubas

Page 2 of 2

Letter
Attached