

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90052 026 ***150.00

DOCUMENT # F00000002986

1. Entity Name
PRIVATEL, INC.

Principal Place of Business

**524 BRIGHTON AVE., SUITE 3
SPRING LAKE NJ 07762**

Mailing Address

**524 BRIGHTON AVE., SUITE 3
SPRING LAKE NJ 07762**

2. Principal Place of Business

**2022 Highway 71
Suite, Apt. #, etc.
SUITE # 204**

3. Mailing Address

**P.O. Box 73
Suite, Apt. #, etc.**

City & State

SPRING LAKE HTS. N.J.

Zip

07762

Country

USA

City & State

SPRING LAKE N.J.

Zip

07762

Country

USA

4. FEI Number

22-3593181

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**INTERNATIONAL SATELLITE SYSTEMS, INC.
3737 S. TUTTLE AVENUE
SARASOTA FL 34239**

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, 2002 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 | C | <input type="checkbox"/> Delete |
| NAME | MASTRORILLI, NICHOLAS SR. | |
| STREET ADDRESS | 517 MORRIS AVENUE | |
| CITY-ST-ZIP | SPRING LAKE NJ 07762 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | MASTRORILLI, CECILIA | |
| STREET ADDRESS | 517 MORRIS AVENUE | |
| CITY-ST-ZIP | SPRING LAKE NJ 07762 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | MASTRORILLI, NICHOLAS JR | |
| STREET ADDRESS | 6 CAPITAL REAL RD | |
| CITY-ST-ZIP | HOWELL NJ 07731 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | MASTRORILLI, PATRICK | |
| STREET ADDRESS | 427 ESSEX AVENUE | |
| CITY-ST-ZIP | SPRING LAKE NJ 07762 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | MASTRORILLI, BRIAN | |
| STREET ADDRESS | 514 SUSSEX AVENUE | |
| CITY-ST-ZIP | SPRING LAKE NJ 07762 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|--|---|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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

1/5/02
Date

732-974-1102
Daytime Phone #

0574373 AT

CR2E034 (9/01)