2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002
Secretary of State

DOCUMENT# F00000003257

Entity Name: INTEGRATED SYSTEMS & SERVICES HOLDING COMPANY

Current Principal Place of Business:

150 CLOVE ROAD
LITTLE FALLS, NJ 07424

New Principal Place of Business:

Current Mailing Address:

150 CLOVE ROAD
LITTLE FALLS, NJ 07424

New Mailing Address:

FEI Number: 22-3559079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	ST	( ) Delete
Name:	WEINSTEIN, GLENN	
Address:	642 COBB ROAD	
City-St-Zip:	RIVER VALE, NJ 07675	
Title:	P	( ) Delete
Name:	WEINSTEIN, ANDREW	
Address:	11 NOBLE STREET	
City-St-Zip:	PARSIPPANY, NJ 07054	
Title:	V	( ) Delete
Name:	SHEVELEV, SIMON	
Address:	352 LAKEVIEW DRIVE	
City-St-Zip:	WYCKOFF, NJ 07481	
Title:	D	( ) Delete
Name:	SKOPIN, ALLISON	
Address:	32 ACKERMAN DRIVE	
City-St-Zip:	MAHWAH, NJ 07430	
Title:	D	( ) Delete
Name:	SKOPIN, JEFFREY	
Address:	32 ACKERMAN DRIVE	
City-St-Zip:	MAHWAH, NJ 07430	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN WEINSTEIN ST 09/11/2002

Electronic Signature of Signing Officer or Director — Date