

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000005185

1. Entity Name
IG2, INC.

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90137 017 ***150.00

Principal Place of Business

Mailing Address

80-02 KEW GARDENS RD. SUITE 7000
KEW GARDENS NY 11415

80-02 KEW GARDENS RD. SUITE 7000
KEW GARDENS NY 11415

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 11-3304370

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLORIDA FILING & SEARCH SERVICES, INC.
1333 NO. DUVAL STREET
TALLAHASSEE FL 32303

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME SINGER, JACK
STREET ADDRESS 80-02 KEW GARDENS RD, SUITE 7000
CITY-ST-ZIP KEW GARDENS NY 11415

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME ARNOTT, DEBORAH S
STREET ADDRESS 50-18 196TH ST
CITY-ST-ZIP FRESH MEADOWS NY 11365

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME WEBER, BOB
STREET ADDRESS 80-02 KEW GARDENS RD. SUITE 7000
CITY-ST-ZIP KEW GARDENS NY 11415

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE C ☐ Delete
NAME PEACOCK, KIMBERLY
STREET ADDRESS 50-18 196TH ST.
CITY-ST-ZIP FRESH MEADOWS NY 11365

TITLE ☐ Change ☐ Addition
NAME Chairman/CEO
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME BENDELL, BRUCE
STREET ADDRESS 43-40 NORTHERN BLVD.
CITY-ST-ZIP LONG ISLAND CITY NY 11230

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Deborah S. Arnett Deborah S. Arnett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

Date

918 520 6500

Daytime Phone #

CR2E034 (10/00)