

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

02 MAY 10 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

851179

DOCUMENT # F01000003781

1. Entity Name

Quantitude Services, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1 Campus Drive

3. Mailing Address

1 Campus Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Parsippany, NJ

City & State

Parsippany, NJ

Zip

07054

Country

USA

Zip

07054

Country

USA

4. FEI Number

364444070

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CT Corporation System

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

1200 JUNK FEE Island Rd.

City

Plantation

FL

33324DO NOT WRITE
IN THIS SPACE

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 date if applicable.

(NOTE: Registered Agent signature required when re-electing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐January 1, May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director & Chairman of the Board, 9 W. 57th Street Samuel L. Katz N.Y., N.Y. 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, Mark E. Miller 1 Campus Drive Parsippany, NJ 07054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP & Treasurer, Duncan H. Coats 1 Campus Drive Parsippany, NJ 07054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP Secretary, Eric J. Bock 9 W. 57th Street N.Y., N.Y. 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, Tax, Joseph Huber 1 Campus Drive Parsippany, NJ 07054
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Joseph HuberJoseph Huber4/30/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034B (12/01)