

2002 UNIFORM BUSINESS REPORT (UBR)

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

0620314 AT

03-14-2002 90017 002 ***150.00

DOCUMENT # F01000004515

1. Entity Name

TRENT GRAPHICS, INC.

Principal Place of Business

1903 WEST MAIN STREET
STROUDSBURG PA 18360

Mailing Address

1903 WEST MAIN STREET
STROUDSBURG PA 18360

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

13-4063339

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525

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, registered agent, or both, in the State of Florida.

SIGNATURE

Signature

(NC)

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 ☐ Delete
 NAME PELLZ, HARLAN
 STREET ADDRESS 117 E. 57TH STREET 3BH
 CITY-ST-ZIP NEW YORK NY 10022

TITLE T ☐ Delete
 NAME RAMJEET, WESLEYU
 STREET ADDRESS 612 ROBINSON TERRACE
 CITY-ST-ZIP UNION NJ

TITLE PCEO ☐ Delete
 NAME LUCCHEAL, JAMES
 STREET ADDRESS 7 MARY AUSTIN PLACE
 CITY-ST-ZIP NORWAL CT 06850

TITLE V ☐ Delete
 NAME WINARSKY, THEO
 STREET ADDRESS 308 E. 79TH ST. #6C
 CITY-ST-ZIP NEW YORK NY 10021

TITLE T ☐ Delete
 NAME KOUNS, RICK
 STREET ADDRESS 5425 FIELDSTONE ROAD
 CITY-ST-ZIP RIVERDALE NY 10047

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
 NAME
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 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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/02
 Date

Daytime Phone #

CR2E034 (9/01)