

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002386

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: ENG-WONG, TAUB & ASSOCIATES, P.A.

## Current Principal Place of Business:

ONE GATEWAY CENTER 26TH FLOOR  
NEWARK, NJ 07102

## New Principal Place of Business:

ONE GATEWAY CENTER 15TH FLOOR  
NEWARK, NJ 07102

## Current Mailing Address:

ONE GATEWAY CENTER 26TH FLOOR  
NEWARK, NJ 07102

## New Mailing Address:

ONE GATEWAY CENTER 15TH FLOOR  
NEWARK, NJ 07102

FEI Number: 22-2895676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPT ( ) Delete  
Name: ENG-WONG, PAUL  
Address: 2 PENN PLAZA  
City-St-Zip: NEW YORK, NY 10121

Title: VCVP ( ) Delete  
Name: TAUB, MARTIN  
Address: 2 PENN PLAZA  
City-St-Zip: NEW YORK, NY 10121

Title: T ( ) Delete  
Name: ENG-WONG, PAUL  
Address: 2 PENN PLAZA  
City-St-Zip: NEW YORK, NY 10121

Title: D ( ) Delete  
Name: VEEREGOWDA, BABU  
Address: 2 PENN PLAZA  
City-St-Zip: NEW YORK, NY 10121

Title: VD ( ) Delete  
Name: KRAFT, WALTER  
Address: TWO ASHWOOD COURT  
City-St-Zip: SUMMIT, NJ 07901

Title: S ( ) Delete  
Name: TAUB, MARTIN  
Address: 2 PENN PLAZA  
City-St-Zip: NEW YORK, NY 10121

## 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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANNETTE COSTA

FC

04/28/2009

Electronic Signature of Signing Officer or Director

Date