

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

057413 AT

DOCUMENT # F22170

1. Entity Name

AFTEC PROP, INC.

04-11-2002 90661 039 ***150.00

Principal Place of Business

**222 COLUMBIA TURNPIKE
 FLORHAM PARK NJ 07932
 US**

Mailing Address

**222 COLUMBIA TURNPIKE
 FLORHAM PARK NJ 07932
 US**



2. Principal Place of Business

248 COLUMBIA TURNPIKE

3. Mailing Address

248 COLUMBIA TURNPIKE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

FLORHAM PARK, New Jersey

City & State

FLORHAM PARK, New Jersey

4. FEI Number

59-2620432

Applied For

Not Applicable

Zip

07932

Country

USA

Zip

07932

Country

USA

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BECKER & POLIAKOFF, P.A.
 500 AUSTRALIAN AVENUE SOUTH
 NINTH FLOOR
 WEST PALM BEACH FL 33401**

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 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, 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 **PD** ☐ Delete
 NAME **FOSS, JOHN P**
 STREET ADDRESS **1320 SW 20TH ST**
 CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE **VSD** ☐ Delete
 NAME **MURPHY, EDWARD D.**
 STREET ADDRESS **91 CHRISTINE DRIVE**
 CITY-ST-ZIP **E. HANOVER NJ 07936**

TITLE **VD** ☐ Delete
 NAME **EDSON, ANNA L**
 STREET ADDRESS **1320 S.W. 20TH ST**
 CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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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)(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, without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)