

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F61494

1. Entity Name

DADE CONTRACT HARDWARE, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90286 003 ***150.00

Principal Place of Business

3855 COMMERCE PKWY
MIRAMAR FL 33025
US

Mailing Address

30 ROCKEFELLER PLAZA
STE 4225
NEW YORK NY 10112
US

130640



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **13-3155838**

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

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

Name

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

City

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 re-registering)

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 **C** ☐ Delete
NAME **RENNERT, IRA LEON**
STREET ADDRESS **30 ROCKEFELLER PLAZA 42ND FLOOR**
CITY-ST-ZIP **NEW YORK NY**

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

TITLE **V** ☐ Delete
NAME **FAY, ROGER L**
STREET ADDRESS **30 ROCKEFELLER PLAZA 42ND FL**
CITY-ST-ZIP **NEW YORK NY 10112**

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

TITLE **V** ☐ Delete
NAME **SIEGEL, JOHN A JR**
STREET ADDRESS **30 ROCKEFELLER PLAZA 42ND FL**
CITY-ST-ZIP **NEW YORK NY 10112**

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

TITLE **S** ☐ Delete
NAME **D'ATRI, JUSTIN W.**
STREET ADDRESS **30 ROCKEFELLER PLAZA 42ND FL**
CITY-ST-ZIP **NEW YORK NY 10112**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **805 Third Avenue**
CITY-ST-ZIP **New York, NY 10022**

TITLE **AS** ☐ Delete
NAME **RYAN, MICHAEL C**
STREET ADDRESS **100 MAIDEN LANE**
CITY-ST-ZIP **NEW YORK NY 10038**

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

TITLE **AS** ☐ Delete
NAME **SADLOWSKI, DENNIS A**
STREET ADDRESS **30 ROCKEFELLER PLAZA 42ND FL**
CITY-ST-ZIP **NEW YORK NY 10112**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John A. Siegel, Jr. VP 4/16/01 (212) 541-6000

Date

Daytime Phone #

CR2E034 (10/00)