

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F92000000010**

1. Entity Name

ENHANCED INVESTMENT TECHNOLOGIES, INC.**FILED**
Feb 11, 2000 8:00 am
Secretary of State

02-11-2000 90007 005 ***150.00

Principal Place of Business

2401 PGA BLVD.
SUITE 200
WEST PALM BEACH FL 33410
US

Mailing Address

ONE PALMER SQUARE, SUITE 303
PRINCETON NJ 08542-3718

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

213 Washington St.

Suite, Apt. #, etc.
Tax - 8th Fl.City & State
Newark, NJZip
07102-3777Country
US

DO NOT WRITE IN THIS SPACE

4. FEI Number **22-2808571**Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301**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, 2000 Fee will be \$550.00
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	T	<input type="checkbox"/> Delete
NAME	CHAPLIN, C E	
STREET ADDRESS	751 BROAD ST	
CITY-ST-ZIP	NEWARK NJ 07102	
TITLE	D	<input type="checkbox"/> Delete
NAME	MELZER, MENDEL A	
STREET ADDRESS	751 BROAD ST	
CITY-ST-ZIP	NEWARK NJ	
TITLE	S	<input type="checkbox"/> Delete
NAME	HEALEY, WILLIAM V	
STREET ADDRESS	751 BROAD ST	
CITY-ST-ZIP	NEWARK NJ 07102-3777	
TITLE	SVP	<input type="checkbox"/> Delete
NAME	HURLEY, DAVID E	
STREET ADDRESS	2401 PGA BLVD, SUITE 200	
CITY-ST-ZIP	PALM BEACH GARDENS FL	
TITLE	DC	<input type="checkbox"/> Delete
NAME	FERNHOLZ, ROBERT E	
STREET ADDRESS	ONE PALMER SQUARE STE 303	
CITY-ST-ZIP	PRINCETON NJ	
TITLE	DCP	<input type="checkbox"/> Delete
NAME	GARVY, ROBERT A	
STREET ADDRESS	2401 PGA BLVD, STE 200	
CITY-ST-ZIP	PALM BEACH GARDENS FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Janice Pavlou
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #