

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000002337

1. Entity Name

RESERVOIR CAPITAL CORPORATION

**FILED**  
**Feb 29, 2000 8:00 am**  
**Secretary of State**

02-29-2000 90181 019 \*\*\*150.00

Principal Place of Business

Mailing Address

PRINTERS MILL RD  
700  
MILLS MD 21117

100 PRINTERS MILL RD  
STE 700  
OWINGS MILLS MD 21117-7306  
US

2. Principal Place of Business

100 PRINTERS MILL ROAD

3. Mailing Address

Suite, Apt. #, etc.

City & State

Suite 700  
OWINGS MILL, MD

Zip  
21117

Country  
BALTIMORE

4. FEI Number

52-1726483

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

HIQ CORPORATE SERVICES, INC.  
526 EAST PARK AVENUE  
SUITE 200  
TALLAHASSEE FL 32301

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 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 ☐ Delete  
NAME STERN, IVAN  
STREET ADDRESS 3605 ANTON FARMS ROAD  
CITY-ST-ZIP BALTIMORE MD 21208

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

TITLE ☐ Delete  
NAME FOX, RODNEY JOHN  
STREET ADDRESS 2437 SHIL FOREST ROAD  
CITY-ST-ZIP BALTIMORE MD 21208

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

TITLE ☐ Delete  
NAME DSTV  
WASSERMAN, JACK B  
STREET ADDRESS 3416 GARRISON FARMS ROAD  
CITY-ST-ZIP BALTIMORE MD 21208

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

TITLE ☐ Delete  
NAME D  
DALSEIMER, BABETTE  
STREET ADDRESS 7368 PARK HEIGHTS AVENUE  
CITY-ST-ZIP BALTIMORE MD 21208

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

TITLE ☐ Delete  
NAME D  
PERLMAN, ANTHONY  
STREET ADDRESS 6108 IVYDENE TERRACE  
CITY-ST-ZIP BALTIMORE MD 21209

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

TITLE ☐ Delete  
NAME S  
BRESLIN, AMY S.  
STREET ADDRESS 9999 OLD MILL ROAD  
CITY-ST-ZIP ELLICOTT CITY MD

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

Date

Daytime Phone #

JOHN FOX  
PRESIDENT

2/1/00 (410) 902-2000