

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F93000003181

FILED  
Apr 23, 2002 8:00 AM  
Secretary of State

Entity Name: BOWE SYSTEC INC.

## Current Principal Place of Business:

200 FRANK RD  
HICKSVILLE, NY 11801 US

## New Principal Place of Business:

60 ADAMS AVENUE  
HAUPPAUGE, NY 11788 US

## Current Mailing Address:

200 FRANK RD  
HICKSVILLE, NY 11801 US

## New Mailing Address:

60 ADAMS AVENUE  
HAUPPAUGE, NY 11788 US

FEI Number: 11-2511423

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOMBARD, JOHN  
Address: 200 FRANK RD  
City-St-Zip: HICKSVILLE, NY

Title: S ( ) Delete  
Name: WITTHUHN, WILFRIED DR.  
Address: 120 WEST 45TH STREET  
City-St-Zip: NEW YORK, NY 100364610

Title: D ( ) Delete  
Name: GERCKENS, CLAUS  
Address: 200 FRANK RD  
City-St-Zip: HICKSVILLE, NY

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LOMBARD, JOHN  
Address: 60 ADAMS AVENUE  
City-St-Zip: HAUPPAUGE, NY 11788

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

Title: D (X) Change ( ) Addition  
Name: GERCKENS, CLAUS  
Address: 60 ADAMS AVENUE  
City-St-Zip: HAUPPAUGE, NY 11788

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN LOMBARD

P

04/23/2002

Electronic Signature of Signing Officer or Director

Date