2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9400000385 1. Entity Name NATIONAL RETAIL TRANSPORTATION, INC.					Secretary of State 04-24-2001 90048 023 ***150.00			
Principal Place of Business 333 MEADOWLAND PARKWAY SECAUCUS NJ 07094		Mailing Address 333 MEADOWLAND PARKWAY SECALICUS NJ 07094			- 44692			
	Place of Business 6+4 STREET #, etc.	3. Mailing Address 1820 16 h Suite, Apt. #, etc.	BTREET		DO NO:	WRITE IN THIS SP	ACE	
City & Stat	GEN NT	City & State N. DERGEN	NJ		4. FEI Number 22-225	60997		oplied For ot Applicable
Zip	047 Country USA	Zip 07047	Country		5. Certificate of Status Des	ileo 🗀 Èe	8.75 Add	
 	6. Name and Address of Current I	Registered Agent	- Na	ame .	7. Name and Address of h	lew Registered Ag	ent .	
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324					fress (P.O. Box Number is Not Acceptable)			
		_	Cit		,	FL	Zip Code	3
Tax filing r	Signature, typed or printed name of registered agent at oration is eligible to satisfy its intangible requirement and elects to do so.	FILE NOW	!!! FEE IS \$ 001 Fee will !	be \$550.00	10. Election Campaig		\$5.0 Added	O May Be
	ria on back)	Make Check Payat		ment of State				
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC WALSH, NORBERT J 333 MEADOWLAND PARKWAY SECAUCUS NJ 07094	DEFECTORS Delete	12. TITLE NAME STREET ADDI CITY-ST-ZIF	W154	ADDITIONS/CHANGES TO TOENT VEWSKI RAYM 16 M STREET TH BERGEN	IOND I	Change	Addition
TITLE NAME STREET ADDRESS CITY_ST_ZIP	ST WISNIEWSKI, RAYMOND 2820 16TH STREET -NORTH-BERGEN-NJ-07047	™ Delete	TITLE NAME STREET ADDI CITY-ST-ZIP	SECRE FRA 28 yo	THRY TREASHINGS S. WAS 1644 STREET 27H BERGEN	LSH III	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADD CITY-ST-ZIP	,			Change	Addition
NAME STREET ADDRESS CITY-ST-2IP		☐ Delete	TITLE NAME STREET ADDR] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADOR CITY-ST-ZIP] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADOR CITY-ST-ZIP) Change	Addition
of the core	erify that the information supplied with the or this report or supplemental report is trooration or the receiver or frustee empower or on an attachment with an address, with	ue and accurate and that m	iv signature sh	iall have the sam	ne legal effect as if made un	der oath: that I am a	an officer o	or director
SIGNATI		HTED HANDOF FLORING OFFICER O	OR DON	Kirk.	4/16/0	701-370 Deyin	2-36	09_
	Fram Jb	Je Francis	s walst	Secreta	ary 5/7/01	201-33	10-76	13