

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90320 035 ***150.00

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DOCUMENT # F94000000737

1. Entity Name

BARTHCO INTERNATIONAL, INC.

Principal Place of Business

**7575 HOLSTEIN AVE
PHILADELPHIA PA 19153
US**

Mailing Address

**7575 HOLSTEIN AVE
PHILADELPHIA PA 19153
US**

C0040116



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **23-1733430**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS 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, 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

TITLE **CPS** ☐ Delete
NAME **COLGAN, DENNIS JR.**
STREET ADDRESS **12 COVE ROAD**
CITY-ST-ZIP **MOORESTOWN NJ 08057**

TITLE **Q** ☒ Delete
NAME **STEVENSON, WILLIAM**
STREET ADDRESS **108 MANSION DR.**
CITY-ST-ZIP **MEDIA PA 19063**

TITLE **VT** ☐ Delete
NAME **ERCOLANI, JOHN D**
STREET ADDRESS **2 DEVON ROAD**
CITY-ST-ZIP **CINNAMISON NJ 08077**

TITLE **V** ☐ Delete
NAME **QUEE, ROBERT CHIN**
STREET ADDRESS **1095 MIDLAND ST**
CITY-ST-ZIP **UNIONDALE NY 11553**

TITLE **CEOS** ☐ Delete
NAME **COLGAN, DENNIS JR.**
STREET ADDRESS **12 COVE ROAD**
CITY-ST-ZIP **MOORESTOWN NJ 08057**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE **C00** ☐ Change ☒ Addition
NAME **WEISS, DAVID M.**
STREET ADDRESS **6030 MAIN STREET**
CITY-ST-ZIP **VOORHEES, NJ 08043**

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

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

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

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

3/26/2001

Date

(215) 937-6657

Daytime Phone #

CR2E034 (10/00)