## **FILED** Jul 02, 2002 8:00 am **Secretary of State**

07-02-2002 90813 049 \*\*\*150.00

Daytime Phone •

## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 7-9400000855 1. Entity Name Globe Fearon Inc. B0126752 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business
CW-Lafte-Street DO NOT WRITE IN THIS SPACE ite, Apr. #, etc. 1350 Ave. Of the America Upper saddle River City & State Applied For NY M 0915784 Not Applicable ·NJ Country \$8.75 Additional Zip 67458 10019 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent Name The frentie-Hall Corp. System, Inc DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1201 Hays St City Tallahassee 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 January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State 10. Election Campaign Financing This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) \$5.00 May Be OFFICERS AND DIRECTORS 11. SUP & sevetary / Director fobert L. Dancy one Lake st CR2E034B (12/01) TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Upper scuddle River, NJ 07458 EUP / Director TITLE NAME Peter Jovanovich NAME one take st Upper saddle Liver, NJ07458 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE CFO George Werner NAME NAME STREET ADDRESS one Lake st STREET ANDRESS DO NOT WRITE Upper saddle River. NJ 07458 CITY - ST - ZIP CITY-ST-ZIP President Beth wray TITLE ŤĮTLĖ IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS One Lake St upper saddle liver, NJ 07458 CITY-ST-ZIP CITY-ST-7IP UP & Asst: Severant TITLE Wharron NÄME NAME 1330 Ave. of the American STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE TITLE NAME NAME STREET ADDRESS 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 on an attachment with an address, with all other like empowered. 6/17/02 Thomas Wharton SIGNATURE: \_ SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attochment BOID 10152



## TAX DEPARTMENT

One Lake Street Upper Saddle River, NJ 07458 (201) 785-2820

June.25, 2002

Department of State Uniform Business Report Filings Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Globe Fearon, Inc. FEIN: 06-0915784

Dear Sir or Madam:

#F9400000855, the 2002 Uniform Business Report. A check in the amount of \$150 is enclosed as payment for the filing fee. We respectfully request an abatement of the late filing fee as we never received the preprinted forms for Globe Fearon, Inc.

Very truly yours,

Globe Fearon, Inc.

Joseph Pietroburgo

Assistant Director of Taxes