

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000003946

1. Entity Name

SHADRALL CORP.

**FILED**  
**Mar 28, 2000 8:00 am**  
**Secretary of State**

03-28-2000 90006 007 \*\*\*150.00

Principal Place of Business

Mailing Address

% AUBURDALE PROPERTIES, INC.  
372 WASHINGTON ST  
WELLESLEY MA 02181

% AUBURDALE PROPERTIES, INC.  
372 WASHINGTON ST  
WELLESLEY MA 02481-6202

2. Principal Place of Business

50 Tice Blvd.

3. Mailing Address

50 Tice Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Woodcliff Lake, NJ

City & State

Woodcliff Lake NJ

Zip

07675

Country

USA

Zip

07675

Country

USA

4. FEI Number

04-3117402

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST  
SUITE 105  
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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PDT  
DEMPSEY, JOSEPH J JR.  
157 SOUTH BEACH ROAD  
HOBE SOUND FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PDT  
Dempsey, Joseph J JR  
41 South Beach Rd  
HOBE Sound FL 33455 ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BROSER, ARNOLD  
2443 FISHER ISLAND DRIVE  
FISHER ISLAND FL 33109 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
E.V.P.  
Shalom Wall  
50 Tice Blvd.  
Woodcliff Lake, NJ 07675 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DIVINE, HAROLD S  
8034 FISHER ISLAND DRIVE  
FISHER ISLAND FL 33109 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

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

3/20/00

Date

201-391-3404

Daytime Phone #

CR20034 (9/00)