

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2000 8:00 am
Secretary of State
04-18-2000 90191 005 ***150.00

DOCUMENT # F95000003821
Entity Name
Mistic Brands, Inc.

Principal Place of Business Mailing Address
709 Westchester Ave. 709 Westchester Ave.
White Plains, NY 10604 White Plains, NY 10604

Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

4. FEI Number Applied For
13-3844011 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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, 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		
TITLE	DCEO	<input type="checkbox"/> Delete
NAME	Weinstein, Michael F.	
STREET ADDRESS	709 Westchester Ave.	
CITY-ST-ZIP	White Plains, NY 10604	
TITLE	VP CFO	<input type="checkbox"/> Delete
NAME	Allen, Richard	
STREET ADDRESS	709 Westchester Avenue	
CITY-ST-ZIP	White Plains, NY 10604	
TITLE	V	<input type="checkbox"/> Delete
NAME	Crowe, Robert J.	
STREET ADDRESS	280 Park Ave.	
CITY-ST-ZIP	New York, NY 10017	
TITLE	VS	<input type="checkbox"/> Delete
NAME	Rosen, Stuart I.	
STREET ADDRESS	280 Park Ave.	
CITY-ST-ZIP	New York, NY 10017	
TITLE	P COO D	<input type="checkbox"/> Delete
NAME	Cavallo, Ernest J.	
STREET ADDRESS	709 Westchester Ave.	
CITY-ST-ZIP	White Plains, NY 10604	
TITLE	V	<input type="checkbox"/> Delete
NAME	Barnes, John L. Jr.	
STREET ADDRESS	280 Park Ave.	
CITY-ST-ZIP	New York, NY 10017	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Robert J. Crowe* Robert J. Crowe, Asst. VP-Taxes 4/10/00 212-451-3115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)