

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005495

1. Entity Name  
TDC ELECTRONICS, INC.

**FILED**  
**Feb 13, 2001 8:00 am**  
**Secretary of State**

02-13-2001 90024 019 \*\*\*150.00

Principal Place of Business  
111 MINEOLA AVE  
ROSLYN HEIGHTS NY 11577

Mailing Address  
111 MINEOLA AVE  
ROSLYN HEIGHTS NY 11577

00020282



DO NOT WRITE IN THIS SPACE

|                                |         |                     |         |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business |         | 3. Mailing Address  |         |
| Suite, Apt. #, etc.            |         | Suite, Apt. #, etc. |         |
| City & State                   |         | City & State        |         |
| Zip                            | Country | Zip                 | Country |

|                                  |            |                                                         |  |
|----------------------------------|------------|---------------------------------------------------------|--|
| 4. FEI Number                    | 13-3014754 | Applied For                                             |  |
|                                  |            | Not Applicable                                          |  |
| 5. Certificate of Status Desired |            | <input type="checkbox"/> \$8.75 Additional Fee Required |  |

|                                                                                     |  |                                                                                   |  |
|-------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------|--|
| 6. Name and Address of Current Registered Agent                                     |  | 7. Name and Address of New Registered Agent                                       |  |
| NATIONAL CORPORATE RESEARCH, LTD., INC.<br>1406 HAYES ST #2<br>TALLAHASSEE FL 32301 |  | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>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) <input checked="" type="checkbox"/> | <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After MAY 1, 2001 Fee will be \$550.00</b><br><b>Make Check Payable to Department of State</b> | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|

| 11. OFFICERS AND DIRECTORS                     |                                                                                                                        | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |                                                                                                                                                    |
|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | CO<br>JARJANETTE, JEAN-JACQUES<br><del>66 ROUTE, 8, AVENUE DU LER MAI</del><br><del>91124 PALAISEAU CEDEX FRANCE</del> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>CS ROUTE, 1 AVE. NEWTON<br>92142 CLAMART, FRANCE                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>OTT, FRANCOIS<br>TDC INC 111 MINEOLA AVE<br>ROSLYN HEIGHTS NY                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>MINEOLA<br>11577                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>MARSCHNER, EDWARD<br>ONE BROADWAY<br>NEW YORK NY                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>C/O FOX HORAN & CAMERINI LLP<br>825 THIRD AVE., NEW YORK, NY 10022 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>WUESTEFELD, KRIS<br>TDC INC 111 MINEOLA AVE<br>ROSLYN HEIGHTS NY 11577                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | T<br>ZEOLLA, JOSEPH<br>TDC INC 111 MINEOLA AVE<br>ROSLYN HEIGHTS NY                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> 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: ES C Marschner  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 Feb 2001 212-480-4800  
Date Daytime Phone #

CR2E034 (10/00)