2001 UNIFORM BUSINESS REPORT (UBR)

May 22, 2001 8:00 am', Secretary of State DOCUMENT # F9600000449 05-22-2001 90011 047 ****61.25 CLOSE ENCOUNTERS WITH MUSIC, INC. Principal Place of Business Mailing Address PO BOX 130 801 DOUGWAY RD SPENCERTOWN NY 12165 SPENCERTOWN NY 12165 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc 4. FEI Number Applied For City & State City & State 14-1783014 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KLEIN, RUBIN DR 1000 E ISLAND BLVD #1902 WILLIAMS ISLAND FL 33160 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Dr. Stuart Kuller 137 Gt. Barrington Rd. Addition ☐ Change TITLE ☐ Delete TITLE BEINECKE, FREDERICK NAME STREET ADDRESS STREET ADDRESS 998 5TH AVE W. Stockbridge, MA 01266 CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10128** Jehuda Hanani ☐ Change ☐ Delete TITI F DV 1801 Dugway Rd. NAME GIDDENS, JAMES NAME STREET ADDRESS STREET ADDRESS 2 SUTTON PL S Spencertown, NY 12165 CITY-ST-ZIP **NEW YORK NY 10011** CITY-ST-ZIF Terome Rosenberg Addition ☐ Delete TITLE TITLE NAME NAME LIEBER: CHARLES 200 E.66th St. STREET ADDRESS STREET ADDRESS 801 DOUGWAY RD CITY-ST-ZIP NY, NY 10021 CITY-ST-ZIP SPENCERTOWN NY 12165 Addition ☐ Change Delete TITLE TITLE so Tavitian NAME HANANI, HANNAH NAME STREET ADDRESS 801 DOUGWAY RD STREET ADDRESS Tice Blad. CITY-ST-ZIP CITY-ST-ZIP clieftake, NJ 07675 SPENCERTOWN NY 12165 ☐ Change Addition ☐ Detete TITLE ene Tavitian TITLE FONTAINE, ELIZABETH NAME Syncosort STREET ADDRESS STREET ADDRESS 965 FIFTH AVE CITY-ST-ZIP CITY-ST-7IP **NEW YORK NY 10021** Change Addition ☐ Delete TITLE TITLE GRUNBERG, JUDITH NAME NAME STREET ADDRESS STREET ADDRESS 83 SILVERNAIL RD CITY-ST-ZIP CITY-ST-7/P VALATIE NY 12184

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

FILED