

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 22, 2001 8:00 am**  
**Secretary of State**

05-22-2001 90011 047 \*\*\*\*61.25

**DOCUMENT # F96000000449**

1. Entity Name  
**CLOSE ENCOUNTERS WITH MUSIC, INC.**

Principal Place of Business Mailing Address  
**801 DOUGWAY RD PO BOX 130**  
**SPENCERTOWN NY 12165 SPENCERTOWN NY 12165**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **14-1783014**

Applied For  
 Not Applicable

Zip Country Zip Country

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

**KLEIN, RUBIN DR**  
**1000 E ISLAND BLVD #1902**  
**WILLIAMS ISLAND FL 33160**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input type="checkbox"/> Delete
NAME	<b>BEINECKE, FREDERICK</b>	
STREET ADDRESS	<b>998 5TH AVE</b>	
CITY-ST-ZIP	<b>NEW YORK NY 10128</b>	
TITLE	DV	<input type="checkbox"/> Delete
NAME	<b>GIDDENS, JAMES</b>	
STREET ADDRESS	<b>2 SUTTON PL S</b>	
CITY-ST-ZIP	<b>NEW YORK NY 10011</b>	
TITLE	DVT	<input type="checkbox"/> Delete
NAME	<b>LIEBER, CHARLES</b>	
STREET ADDRESS	<b>801 DOUGWAY RD</b>	
CITY-ST-ZIP	<b>SPENCERTOWN NY 12165</b>	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	<b>HANANI, HANNAH</b>	
STREET ADDRESS	<b>801 DOUGWAY RD</b>	
CITY-ST-ZIP	<b>SPENCERTOWN NY 12165</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>FONTAINE, ELIZABETH</b>	
STREET ADDRESS	<b>965 FIFTH AVE</b>	
CITY-ST-ZIP	<b>NEW YORK NY 10021</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>GRUNBERG, JUDITH</b>	
STREET ADDRESS	<b>83 SILVERNAIL RD</b>	
CITY-ST-ZIP	<b>VALATIE NY 12184</b>	

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Dr. Stuart Kuller</b>	
STREET ADDRESS	<b>137 Gt. Barrington Rd.</b>	
CITY-ST-ZIP	<b>W. Stockbridge, MA 01266</b>	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Yehuda Hanani</b>	
STREET ADDRESS	<b>801 Dugway Rd.</b>	
CITY-ST-ZIP	<b>Spencertown, NY 12165</b>	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Jerome Rosenberg</b>	
STREET ADDRESS	<b>200 E. 66th St.</b>	
CITY-ST-ZIP	<b>NY, NY 10021</b>	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Aso Tavitian</b>	
STREET ADDRESS	<b>c/o Syncosort</b>	
CITY-ST-ZIP	<b>50 Tice Blvd. Woodcliff Lake, NJ 07675</b>	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Arlene Tavitian</b>	
STREET ADDRESS	<b>c/o Syncosort</b>	
CITY-ST-ZIP	<b>50 Tice Blvd. Woodcliff Lake, NJ 07675</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: HANNAH HANANI 5/15/01 800843-0778

CR2E037 (10/00)