

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90149 043 ***150.00

DOCUMENT # F96000003788

1. Entity Name

PERSONAL COMPUTER RENTAL CORPORATION

Principal Place of Business

Mailing Address

CEDAR BROOK DR

4 CEDAR BROOK DR

STE 1
CRANBURY NJ 08512

STE 1
CRANBURY NJ 08540-6623
US

2. Principal Place of Business

3. Mailing Address

211 College Road East

211 College Road East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st FL.

1st FL.

City & State

City & State

Princeton NJ

Princeton NJ

Zip

Country

Zip

Country

08540

US

08540

US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E PARK AVE
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	CEO OLINGER, ALLEN M 4 CEDAR BROOK DR #1 CRANBURY NJ 08512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP KNOPP, ORIN 4 CEDAR BROOK DR #1 CRANBURY NJ 08512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT HILLA, JEFFREY T 4 CEDAR BROOK DR #1 CRANBURY NJ 08512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THCHMAN, MARTIN 4 CEDAR BROOK DR #1 CRANBURY NJ 08512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WITTEVEEN, RADUL 4 CEDAR BROOK DR #1 CRANBURY NJ 08512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEA, D OLINGER, ALLEN M. 211 College Road East Princeton, NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP, D KNOPP, ORIN 211 College Road East Princeton, NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Hilla, Jeffrey T 211 College Road East Princeton, NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	211 College Road East Princeton NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	211 College Road East Princeton NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHRISTOPHER Henretta 211 College Road East Princeton, NJ 08540	<input type="checkbox"/> Change <input checked="" 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:

SIGNATURE REQUIRED

CFO

4/6/00

609-720-1411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)