

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003869

1. Entity Name
GLOBESPAN, INC.

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90095 035 ***150.00

Principal Place of Business

100 SCHULTZ DR
RED BANK NJ 07701
US

Mailing Address

100 SCHULTZ DR
RED BANK NJ 07701
US

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 75-2658218

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

UCC FILING & SEARCH SERVICES, INC.
526 E. PARK AVENUE, SUITE 200
TALLAHASSEE FL 32301

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GEDAY, ARMANDO
100 SCHULTZ DR
RED BANK NJ 07701 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VST
MCMULLAN, ROBERT
100 SCHULTZ DR
RED BANK NJ 07701 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
SENNHAUSER, THOMAS
100 SCHULTZ DR
RED BANK NJ 07701 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
ARETAKIS, NICHOLAS
100 SCHULTZ DR
RED BANK NJ 07701 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

DOC #p96000003869
ATTACHMENT A0671986



August 1, 2000

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

Dear Sir/Madam:

Attached, please find the completion of the 2000 UNIFORM BUSINESS REPORT (UBR), which I have completed as per your request along with the annual required fee of \$150.00.

Although I am aware that the form indicates a "Second Notice," to the best of my knowledge, or anybody else's in our organization, nobody has received an initial notice. Therefore we are asking you to forgive us of any additional penalty fees.

If there are any other questions, please feel free to contact me. I can be reached by telephone at (732)345-6024.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Jeremy D. Saferstein', written over a horizontal line.

Jeremy D. Saferstein
Financial Analyst