

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000006016

1. Entity Name

MERCHANDISE MANAGEMENT SYSTEMS, INC.

FILED

Feb 02, 2000 8:00 am
Secretary of State

02-02-2000 90005 041 ***150.00

Principal Place of Business

Mailing Address

110 SOUTH JEFFERSON ROAD
WHIPPANY NJ 07981
US

110 SOUTH JEFFERSON ROAD
WHIPPANY NJ 07981-1038
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

22-3406294

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 DC ☐ Delete
NAME STOTLAND, HOWARD
STREET ADDRESS 2800 TRANS-CANADA HWY.
CITY-ST-ZIP POINTE-CLAIRE QUEBEC CANADA H9R -1B1

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

TITLE VT ☐ Delete
NAME FROST, JOHN
STREET ADDRESS 2800 TRANS-CANADA HWY.
CITY-ST-ZIP POINTE-CLAIRE QUEBEC CANADA H9R -1B1

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

TITLE PD ☐ Delete
NAME MILLER, CHARLES
STREET ADDRESS 88 S. FINLEY AVE.
CITY-ST-ZIP BASKING RIDGE NJ 07920

TITLE ☒ Change ☐ Addition
NAME 110 SOUTH JEFFERSON ROAD
STREET ADDRESS WHIPPANY, NJ 07981
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME RUHANA, MICHAEL
STREET ADDRESS 88 S. FINLEY AVE.
CITY-ST-ZIP BASKING RIDGE NJ 07920

TITLE ☒ Change ☐ Addition
NAME 101 WEST OHIO STREET, SUITE 2250
STREET ADDRESS INDIANAPOLIS, IN 46204
CITY-ST-ZIP

TITLE S ☒ Delete
NAME BRAMEL, TINA
STREET ADDRESS 88 S. FINLEY AVE.
CITY-ST-ZIP BASKING RIDGE NJ 07920

TITLE ☒ Change ☐ Addition
NAME S CHRIS PIAZZA
STREET ADDRESS 2800 TRANS-CANADA HWY.
CITY-ST-ZIP POINTE-CLAIRE, QUEBEC, CANADA H9R1B1

TITLE S ☐ Delete
NAME GOLD, STEVEN
STREET ADDRESS ONE AMERICAN ROW
CITY-ST-ZIP HARTFORD CT 06103-2819

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

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 JOAN FROST
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/10/2000 (514) 426-0822
Date Daytime Phone #

CR2E034 (9/99)