

2000 UNIFORM BUSINESS REPORT (UBR)

00054

DOCUMENT # F97000006150

1. Entity Name

PB CONSTRUCTORS INC.

FILED

00 FEB 10 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

ONE PENN PLAZA
NEW YORK NY 10119

ATTN: K. CURRAN
ONE PENN PLAZA
NEW YORK NY 10119-0002

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-3953148

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 P ☐ Delete
NAME RESEIGH, C E
STREET ADDRESS 465 SPRING PARK PL
CITY-ST-ZIP HERNDON VA 20170

TITLE D ☐ Delete
NAME LAMMIE, JAMES L
STREET ADDRESS ONE PENN PLAZA
CITY-ST-ZIP NEW YORK NY 10119

TITLE CD ☐ Delete
NAME GRIGGS, G E
STREET ADDRESS ONE PENN PLAZA
CITY-ST-ZIP NEW YORK NY 10119

TITLE V ☒ Delete
NAME RUBIN, MARTIN
STREET ADDRESS 707 WILSHIRE BLVD., SUITE 2900
CITY-ST-ZIP LOS ANGELES CA 90071

TITLE AT ☐ Delete
NAME PAONE, B N
STREET ADDRESS ONE PENN PLAZA
CITY-ST-ZIP NEW YORK NY 10119

TITLE SVP ☐ Delete
NAME CURRAN, KEVIN J
STREET ADDRESS ONE PENN PLAZA
CITY-ST-ZIP NEW YORK NY 10119

TITLE ☐ Change ☐ Addition
NAME 500003136535--1
STREET ADDRESS -02/16/00--01003--012
CITY-ST-ZIP ***1746.25 ***158.75

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

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

TITLE T ☐ Change ☒ Addition
NAME Fabio, Joan
STREET ADDRESS One Penn Plaza
CITY-ST-ZIP New York, NY 10119

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

TITLE SVP/S ☒ Change ☐ Addition
NAME KE
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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin J. Curran

02/02/00

(212) 465-5304

Date

Daytime Phone #

CR2E034 (9/99)