

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006716

1. Entity Name

UNITED SHOE MACHINERY CORPORATION

**FILED**  
**Apr 01, 2002 8:00 am**  
**Secretary of State**

04-01-2002 90041 004 \*\*\*150.00

0617691 AT

Principal Place of Business

400 RESEARCH DRIVE  
WILMINGTON MA 01887

Mailing Address

400 RESEARCH DRIVE  
WILMINGTON MA 01887

2. Principal Place of Business

165 Ledge St, Nashua NH

3. Mailing Address

165 Ledge St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Nashua NH

City & State

Nashua NH

Zip

03060

Country

USA

Zip

03060

Country

USA

4. FEI Number

52-1648098

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

☒ 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, 2002 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

TITLE PC  
NAME POLVERARI, ANGELO C ☒ Delete  
STREET ADDRESS 400 RESEARCH DRIVE  
CITY-ST-ZIP WILMINGTON MA 01887

TITLE SD  
NAME BRIGGS, JOHN S ☒ Delete  
STREET ADDRESS 400 RESEARCH DRIVE  
CITY-ST-ZIP WILMINGTON MA 01887

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition  
NAME Michael Taricano  
STREET ADDRESS 165 Ledge Street  
CITY-ST-ZIP Nashua NH 03060

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

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

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

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

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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)