

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000862

1. Entity Name

ERGODYNAMICS, INC.

P

**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90009 031 \*\*\*150.00

Principal Place of Business

1308 CENTENNIAL AVE., SUITE 232  
PISCATAWAY NJ 08854

Mailing Address

1308 CENTENNIAL AVE., SUITE 232  
PISCATAWAY NJ 08854

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

22-3504244

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SULLIVAN, JOSEPH  
3325 BAYSHORE BLVD., APT. A-12  
TAMPA FL 33629

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 **P** ☐ Delete  
NAME **HILL, BRIAN P**  
STREET ADDRESS **165 CHIPPENHAM COURT**  
CITY-ST-ZIP **PISCATAWAY NJ 08854**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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  
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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*  
BRIAN R HILL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/00  
Date

732-275-1400  
Daytime Phone #

CR2E034 (5/00)

Attachment  
F99000000862  
A0078820

ErgoDynamics, Inc.  
1308 Centennial Avenue  
Suite 232  
Piscataway, N.J. 08854

Uniform Business Report  
Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

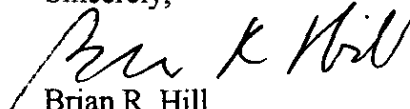
September 11, 2000

Dear Madam or Sir:

Enclosed is check #5083 in the amount of \$150 for the 2000 Uniform Business Report. I request that the penalty fee of \$400 be waived due to the fact that we never received the initial filing report that was due May 1. Our company registered to do business in Florida in 1999 and we were unaware that an annual report would be due the following May 1. Therefore, when we did not receive the notice and the forms, we were not expecting to need to file any forms by May 1, and we did not follow up to request them. Now that we are aware of the May 1 due date, this will not be an issue in the future if we do not receive the forms. I will know to follow up. I sincerely hope that you will understand our situation, and grant the request to waive the penalty.

Thank you for your attention to this matter.

Sincerely,

  
Brian R. Hill  
President