

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90050 029 ***150.00

DOCUMENT # F99000000921

1. Entity Name
RUCKMAN MANAGEMENT, INC.

Principal Place of Business
210 KNICKERBOCKER ROAD
CRESSKILL NJ 07626

Mailing Address
210 KNICKERBOCKER ROAD
CRESSKILL NJ 07626

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
22-2665933

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

WEINSTEIN, NORMAN S
32 SE MIZNER BLVD., #1102
BOCA RATON FL 33432

Name

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

411 NE 7th Avenue

City

Delray Beach

FL

Zip Code
33483

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 *Norman S. Weinstein* **2/7/02**
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **WEINSTEIN, NORMAN S**
STREET ADDRESS **320 SE MIZNER BLVD., #1102**
CITY-ST-ZIP **BOCA RATON FL 33432**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **411 NE 7th Avenue**
CITY-ST-ZIP **Delray Beach, FL 33483**

TITLE **V** ☐ Delete
NAME **WEINSTEIN, SUSAN**
STREET ADDRESS **210 KNICKERBOCKER ROAD**
CITY-ST-ZIP **CRESSKILL NJ 07626**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
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: *Norman S. Weinstein*
Norman S. Weinstein, President

2/7/02 561-330-3662

Date Daytime Phone #

CR2E034 (9/01)