

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000001775

1. Entity Name

PIRELLI OPTICAL SYSTEMS NORTH AMERICA, INC.

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90008 001 ***150.00

Principal Place of Business

Mailing Address

705 INDUSTRIAL DRIVE
LEXINGTON SC 29072

705 INDUSTRIAL DRIVE
LEXINGTON SC 29072-3741

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2447303

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

TITLE	CP	<input checked="" type="checkbox"/> Delete
NAME	RIDDETT, KEVIN E	
STREET ADDRESS	705 INDUSTRIAL DRIVE	
CITY-ST-ZIP	LEXINGTON SC 29072	
TITLE	WV	<input checked="" type="checkbox"/> Delete
NAME	ROSENZWEIG, ALEXANDER	
STREET ADDRESS	705 INDUSTRIAL DRIVE	
CITY-ST-ZIP	LEXINGTON SC 29072	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	VITAGLIANO, ANTHONY	
STREET ADDRESS	705 INDUSTRIAL DRIVE	
CITY-ST-ZIP	LEXINGTON SC 29072	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	VORRASI, JAMES B	
STREET ADDRESS	705 INDUSTRIAL DRIVE	
CITY-ST-ZIP	LEXINGTON SC 29072	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sebastiano Caruso	
STREET ADDRESS	106 Paces Brook, Apt # 10633	
CITY-ST-ZIP	Columbia, SC 29212	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Louis D. Kopsa	
STREET ADDRESS	128 Cove Street	
CITY-ST-ZIP	Irmo, SC 29063	
TITLE	T D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Glenn J. Heiar	
STREET ADDRESS	260 Edgewood Drive	
CITY-ST-ZIP	Chapin, SC 29036	
TITLE	S D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Alexander Rosenzweig	
STREET ADDRESS	2500 Johnson Ave., Apt. # 196	
CITY-ST-ZIP	Brooklyn, NY 10463	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kerin E. Riddett	
STREET ADDRESS	246 Stoneridge Drive, Suite 400	
CITY-ST-ZIP	Columbia, SC 29210	
TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	G. Marchio	
STREET ADDRESS	246 Stoneridge Drive, Ste 400	
CITY-ST-ZIP	Columbia, SC 29210	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/4/00

(803) 951-1012

CR2E034 (9/99)