

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003497

1. Entity Name

CREDITRISKMONITOR.COM, INC.

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90025 036 ***158.75

Principal Place of Business

Mailing Address

2001 MARCUS AVENUE SUITE W290
LAKE SUCCESS NY 11042

2001 MARCUS AVENUE SUITE W290
LAKE SUCCESS NY 11042-1035

2. Principal Place of Business

110 JERICHO TURNPIKE

3. Mailing Address

110 JERICHO TURNPIKE

Suite, Apt. #, etc.

SUITE 202

Suite, Apt. #, etc.

SUITE 202

City & State

FLORAL PARK NY

City & State

FLORAL PARK NY

Zip

11001

Country

USA

Zip

11001

Country

USA

4. FEI Number

36-2972588

Applied For

Not Applicable

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

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

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 PC ☐ Delete
NAME FLUM, JEROME
STREET ADDRESS 9 DUNHAM ROAD
CITY-ST-ZIP SCARSDALE NY 10583

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

TITLE VS ☐ Delete
NAME FENSTORSTOCK, LAWRENCE
STREET ADDRESS 2955 LONNI LANE
CITY-ST-ZIP MORRICK NY 11566

TITLE ☒ Change ☐ Addition
NAME FENSTERSTOCK
STREET ADDRESS
CITY-ST-ZIP MERRICK

TITLE D ☐ Delete
NAME CHARM, LESLIE
STREET ADDRESS 39 HOLDEN LANE
CITY-ST-ZIP CONCORD MA 01742

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

TITLE D ☐ Delete
NAME JAMES, RICHARD
STREET ADDRESS 63 ALDERWOOD ROAD
CITY-ST-ZIP NEWTON MA 02159

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 02459

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME DEMARTINO, JOSEPH
STREET ADDRESS 44 HOLLAND AVENUE
CITY-ST-ZIP FLORAL PARK, NY 11001

TITLE ☐ Delete
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:

Lawrence Fensterstock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/00

Date

(516) 610-4000

Daytime Phone #

CR2E034 (9/99)