

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000003497

FILED
Jan 18, 2002 8:00 AM
Secretary of State

Entity Name: CREDITRISKMONITOR.COM, INC.

Current Principal Place of Business:

110 JERICHO TURNPIKE
STE 202
FLORAL PARK, NY 11001 US

New Principal Place of Business:

Current Mailing Address:

110 JERICHO TURNPIKE
STE 202
FLORAL PARK, NY 11001 US

New Mailing Address:

FEI Number: 36-2972588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: FLUM, JEROME
Address: 9 DUNHAM ROAD
City-St-Zip: SCARSDALE, NY 10583

Title: VS () Delete
Name: FENSTERSTOCK, LAWRENCE
Address: 2955 LONNI LANE
City-St-Zip: MERRICK, NY 11566

Title: D () Delete
Name: CHARM, LESLIE
Address: 39 HOLDEN LANE
City-St-Zip: CONCORD, MA 01742

Title: D () Delete
Name: JAMES, RICHARD
Address: 63 ALDERWOOD ROAD
City-St-Zip: NEWTON, MA 02459

Title: V (X) Delete
Name: DEMARTINO, JOSEPH
Address: 44 HOLLAND AVE
City-St-Zip: FLORAL PARK, NY 11001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE FENSTERSTOCK

VS

01/18/2002

Electronic Signature of Signing Officer or Director

Date