

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F99000006197**

1. Entity Name

~~BLVDIRECT~~ INC.

CSFBdirect, Inc.

Principal Place of Business

HARBORSIDE FINANCIAL CENTER
JERSEY CITY NJ 07311

Mailing Address

HARBORSIDE FINANCIAL CENTER
JERSEY CITY NJ 07311

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

c/o CSFB (USA), Inc.

Suite, Apt. #, etc.

277 Park Avenue, Attn: Tax Dept.

City & State

New York, NY

Zip

10172

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 13-3902248

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE CD ☐ Delete
NAME BRUECKNER, RICHARD
STREET ADDRESS HARBORSIDE FINANCIAL CENTER
CITY-ST-ZIP JERSEY CITY NJ 07311TITLE DCEO ☐ Delete
NAME DARCY, K. BLAKE
STREET ADDRESS HARBORSIDE FINANCIAL CENTER
CITY-ST-ZIP JERSEY CITY NJ 07311TITLE PD ☐ Delete
NAME TONGUE, GLENN H
STREET ADDRESS 27 PARK AVENUE
CITY-ST-ZIP NEW YORK NY 10172TITLE VCFO ☐ Delete
NAME ASCHOFF, SCOTT
STREET ADDRESS HARBORSIDE FINANCIAL CENTER
CITY-ST-ZIP JERSEY CITY NJ 07311TITLE V ☐ Delete
NAME COMPETIELLO, MARK A
STREET ADDRESS 277 PARK AVENUE
CITY-ST-ZIP NEW YORK NY 10172TITLE V ☐ Delete
NAME FLAMBERG, STUART S
STREET ADDRESS 277 PARK AVENUE
CITY-ST-ZIP NEW YORK NY 10172

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE SV ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE V/TM ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE V/DT ☒ 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 27 2001

Date

(212) 892-4939

Daytime Phone #

CR2E034 (10/00)