

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 06, 2000 8:00 am**  
**Secretary of State**

03-02-2000 90098 003 \*\*\*150.00

**DOCUMENT # K92813**

1. Entity Name  
**SELECT-MICROSYSTEMS INC.**



Principal Place of Business Mailing Address  
 678 N. HEDGECOCK SQ  
 SATELLITE BEACH FL 32937  
 US

20272



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country  
 3. Mailing Address Suite, Apt. #, etc. City & State Zip Country

4. FEI Number **59-2958116** Applied For Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**DRESKIN, PAUL M - 605 N RAMONA AVE INDIAN LANTIC FL 32903**  
*Robert Pierce 678 N. Hedgecock St Satellite Beach FL 32937*

7. Name and Address of New Registered Agent  
 Name *Robert Pierce*  
 Street Address (P.O. Box Number is Not Acceptable) *678 N. Hedgecock Square*  
 City *Satellite Beach* FL Zip Code *32937*

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 *Robert Pierce* DATE *8/20/00*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	VP DRESKIN, PAUL M. 20 COUTANT DR. NEW ROCHELLE NY 10804	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DRESKIN, ELLA M 20 COUTANT DR. NEW ROCHELLE NY 10804	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DOC # K92813

20272

8/30/00

Florida Department of State  
Division of Corporations

From: Select Microsystems, Inc.

This is to acknowledge not receiving  
a second notice regarding that the  
Current Registered Agent was to  
someone in Florida:

We have therefore registering

Robert Pierce, 678 N. Hedgecock Sq  
Satellite Beach, FL 32937

as our Current Registered Agent.

Original payment was made and  
is on file.

Paul M. Dreshin

Paul Dreshin  
(914) 582-0034