

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 JUL 21 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M98000000373

1. Entity Name
VITE, LLC

Principal Place of Business: 166 GLOVER AVENUE, NORWALK CT 06850
Mailing Address: 166 GLOVER AVENUE, NORWALK CT 06850



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number: 06-0511171
Applied For: Not Applicable

5. Certificate of Status Desired \$5.00 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: _____ (NOTE: Registered Agent signature required when reinstating) **100003325521-4**

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

~~07/25/00~~ ~~01079~~ ~~006~~
*****50.00 *****50.00

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	MGR EDE, TERENCE W 166 GLOVER AVENUE NORWALK CT 06850	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR STEPHENS, RONALD 166 GLOVER AVENUE NORWALK CT 06850	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR LIVINGSTON, ROBERT A ONE MARINE MIDLAND PLAZA, 6TH FL., EAST TWR BINGHAMTON NY 13902	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR DEBACCO, RONALD 166 GLOVER AVENUE NORWALK CT 06850	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR SONG, S T 85H FL.-NO 76, PO AI ROAD TAIPEI, TAIWAN	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR HURON, PAUL 13 GREEN HAVEN ROAD SALEM NH 03079	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [Signature] **SIGNATURE REQUIRED** Date: 7/17/00 Daytime Phone #: 203-853-4493

CR2E083 (5/00)