## 2000 UNIFORM BUSINESS REPORT (UBR)

NAME STREET ADDRESS CITY - ST - ZIP BASKING RIDGE NJ 07920 TITLE VAS DUAH, ANTOINETTE A. STREET ADDRESS CITY - ST - ZIP MORRISTOWN NJ 07960 TITLE VAS TITLE VAS TITLE VAS TITLE VAS TITLE VAS STREET ADDRESS CITY - ST - ZIP MORRISTOWN NJ 07960 TITLE VAS STREET ADDRESS CITY - ST - ZIP TITLE VAS STREET ADDRESS CITY - ST - ZIP TITLE VAS STREET ADDRESS CITY - ST - ZIP MORRISTOWN NJ 07960 TITLE NAME STREET ADDRESS CITY - ST - ZIP MORRISTOWN NJ 07960 TITLE VS NAME FEIT, ROBERT STREET ADDRESS CITY - ST - ZIP BASKING RIDGE NJ 07920 TITLE NAME STREET ADDRESS CITY - ST - ZIP BASKING RIDGE NJ 07920 CITY - ST - ZIP Change TITLE NAME STREET ADDRESS CITY - ST - ZIP BASKING RIDGE NJ 07920 CITY - ST - ZIP Change TITLE NAME STREET ADDRESS CITY - ST - ZIP Change TITLE NAME TITLE TOTAL THE TOT	00 a
Principal Place of Business   Mailing Address	
ROOM \$2.87 ROOM \$2.87 ROOR ISTOWN, NJ 07960  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  C	.00
OOM \$287 ORRISTOWN, NJ 07960  ROOM \$287 ORRISTOWN, NJ 07960  3. Mailing Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Applied 13–3214019  Street Address of New Registered Agent  Tour Corporation is street Address of New Registered Agent  Tour Corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.  (See criteria on back)  After May's, 2000 Fee will bis \$550.00  Tax filing requirement and elects to do so.  (See criteria on back)  After May's, 2000 Fee will bis \$550.00  Tax filing requirement and elects to do so.  (See criteria on back)  After May's, 2000 Fee will bis \$550.00  Tax filing requirement and elects to do so.  (See criteria on back)  City  FILE NOW!!! FEE 18 \$150.00  Tax filing requirement and elects to do so.  (See criteria on back)  After May's, 2000 Fee will bis \$550.00  Tax filing requirement and elects to do so.  (See criteria on back)  City Tee Registered Agent signatura required when reinstating)  After May's, 2000 Fee will bis \$550.00  Tax filing requirement and elects to do so.  (See criteria on back)  After May's, 2000 Fee will bis \$550.00  Tax filing requirement and elects to do so.  (See criteria on back)  After May's, 2000 Fee will bis \$550.00  Tax filing requirement and elects to do so.  (See criteria on back)  City  Trust Fund Contribution.  After May's, 2000 Fee will bis \$550.00  Trust Fund Contribution.  After May's, 2000 Fee will bis \$550.00  Trust Fund Contribution.  After May's, 2000 Fee will bis \$550.00  Trust Fund Contribution.  City State  City  City  Trust Fund Contribution.  After May's, 2000 Fee will bis \$550.00  Trust Fund Contribution.  Trust Fund Contribution.  After May's, 2000 Fee will bis \$550.00  Trust Fund Contribution.  Trust Fund Contribution.  Trust Fund Contribution.  After May's, 2000 Fee will bis \$550.00  Trust Fund Contribution	
Suite, Apt. 6, etc.  Suite, Ap	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE	
City & State  Country	
Zip Country Zip Country S. Certificate of Status Desired \$8.75 Additions fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent  T CORPORATION SYSTEM  200 SOUTH PINE ISLAND ROAD  LANTATION, FL 33324 City FL Zip Code  1. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  10. FILE NOWIII FEE IS \$150.00  11. Election Campaign Financing Trust Fund Contribution. Address MAY(1, 2000 Fee will be \$550.00  12. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUST FUND CONTRIBUTIONS. (See Criteria on back)  13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  14. MAKE Check Payable to Department of State  15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  16. MARC LINTOCK, KEITH E. SEE ATTACHED  17. ST. Zip BASKING RIDGE NJ 07920  18. Deete TRUE  18. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  19. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  10. Charge TRUE  10. Charge TRUE  11. Charge TRUE  12. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  14. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN TRUE  16. Charge TRUE  17. ST. Zip MORRISTOWN NJ 07960  18. Charge TRUE  18. Charge TRUE  19. Charge TRUE	
Signature   Sign	
S. Cerrocate of status Desired   Fee Required   F	
Street Address (P.O. Box Number is Not Acceptable)  T CORPORATION SYSTEM  200 SOUTH PINE ISLAND ROAD  LANTATION, FL 33324  City FL Zip Code  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.  After MAY 1, 2000 Fee will list \$550.00  After MAY 1, 2000 Fee will list \$550.00  Make Check Payable to Department of State  OFFICERS AND DIRECTORS  ILE  MCCLINTOCK, KEITH E.  MEET ADDRESS  DATE  ATTACHED  STREET ADDRESS  UNAPLE AVE.  WAS  DUAH, ANTOINETTE A.  MEET ADDRESS  UNAPLE AVE.  WAS  DUAH, ANTOINETTE A.  MEET ADDRESS  ATTACHED  STREET ADDRESS  UNAPLE AVE.  WAS  DUAH, ANTOINETTE A.  MEET ADDRESS  TUTNAUER, JEFF.  MEET ADDRESS  TUTNAUER, JEFF.  MEET ADDRESS  ATTACHED  STREET ADDRESS  TUTNAUER, JEFF.  MEET ADDRESS  ATTACHED  STREET ADDRESS  ATTACHED  Change  Chang	<u>'</u>
Street Address (P.O. Box Number is Not Acceptable)    City	
City FL Zip Code  LANTATION, FL 33324  City FL Zip Code  LANTATION, In the State of Florida.  LANTATION Agents signature required when reinstating)  LANTAT	
LANTATION, FL 33324  City FL Zip Code  I. 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.  CIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  C. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	
After MAY. 1; 2000 Fee will be \$550.00    In the above named entity submits this statement for the purpose of changing its 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)  After MAY. 1; 2000 Fee will be \$550.00    In this corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   After MAY. 1; 2000 Fee will be \$550.00    In the corporation is eligible to satisfy its Intangible   A	
After MAY 1, 2000 Fee will be \$550.00 trust Fund Contribution.   DATE    3. This corporation is eligible to satisfy its intangible   After MAY 1, 2000 Fee will be \$550.00 trust Fund Contribution.   Trust Fund Contribution.   After MAY 1, 2000 Fee will be \$550.00 trust Fund Contribution.   After MAY 1, 2000 Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Trust Fund Contribution.   Added to Fee will be \$550.00 trust Fund Contribution.   Trust	
Signature. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  3. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  3. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  4. The Mack Check Payable to Department of State (State)  4. The Mack Check Payable to Department of State (State)  4. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TILE NAME  5. THE NAME ATTACHED  6. The NAME ATTACHED  6. The NAME ATTACHED  6. The NAME ATTACHED  6. The NAME ATTACHED  7. ST. P. THE NAME ATTACHED  7. ST. P. THE NAME ATTACHED  8. THE NAME ATTACHED  8. THE NAME ATTACHED  8. THE NAME ATTACHED  8. T	$\dashv$
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REET ADDRESS   295 N. MAPLE AVE.   STREET ADDRESS   LIST	Addition
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Y-ST-ZIP MORRISTOWN NJ 07960 CTY-ST-ZIP  LE VAS Delete TITLE CTUTNAUER, JEFF.  STREET ADDRESS 412 MT KEMBLE AVE. Y-ST-ZIP MORRISTOWN NJ 07960 CTY-ST-ZIP  LE VS Delete TITLE CHARGE  STREET ADDRESS CTY-ST-ZIP  ME FEIT, ROBERT NAME STREET ADDRESS CTY-ST-ZIP  NAME STREET ADDRESS CTY-ST-ZIP  NAME  STREET ADDRESS CTY-ST-ZIP  Delete TITLE  Change CTY-ST-ZIP  BASKING RIDGE NJ 07920  Change CTY-ST-ZIP	1
MORRISTOWN NO 07980  LE VAS Delete TUTNAUER, JEFF.  ME TUTNAUER, JEFF.  ME TUTNAUER, JEFF.  MANNE STREET ADDRESS (A12 MT KEMBLE AVE.  MORRISTOWN NJ 07960  Delete TITLE  ME FEIT, ROBERT  ME FEIT, ROBERT  ME FEIT, ROBERT  MANNE  ME STREET ADDRESS (ATY-ST-ZIP)  BASKING RIDGE NJ 07920  Delete TITLE  Change   Cha	ļ
TUTNAUER, JEFF.  REETADORESS 412 MT KEMBLE AVE. Y-ST-ZIP MORRISTOWN NJ 07960 CITY-ST-ZIP  LE VS Delete TITLE REETADORESS 131 MORRISTOWN RD. ROOM A2035 STREETADORESS CITY-ST-ZIP  LE V Delete TITLE  Change CITY-ST-ZIP	Addition
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	Addition
MAYNES, ROBERT A  SETADORESS 131 MORRISTOWN RD. ROOM A2008 STREET ADDRESS	
Y-ST-ZIP BASKING RIDGE NJ 07920 CIY-ST-ZIP	
3. 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 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 application of the product of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name application of the corporation of the receiver or trustee empowered.	am an pears
SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	4

## P03848

## AMERICAN BELL INFORMATION, INC.

Election Date 05/01/1999 FEIN 13-3214019

## **ELECTED CORPORATION OFFICERS AND DIRECTORS**

TITLE / NAME

BUSINESS ADDRESS

	OFFICERS
President	295 N. Maple Avenue
John W. Thomson	Basking Ridge, NJ 07920
Vice President & Assistant Secretary	412 Mt. Kemble Avenue, PO Box 1995
Ephraim M. Brecher	Room S267
	Morristown, NJ 07962-1995
Vice President & Secretary	131 Morristown Rd. Bldg.A Rm.A2035
Robert S. Feit	Basking Ridge, NJ 07920-1002
Vice President/Treasurer/Asst. Secretary	295 N. Maple Avenue
Steven Garfinkel	Room 1211N3
	Basking Ridge, NJ 07920-1002
Assistant Secretary	412 Mt. Kemble Avenue
Antoinette A. Duah	Room S287
	Morristown, NJ 07960
Assistant Secretary	295 N. Maple Ave.
Maryann N. McGrath	Basking Ridge, NJ 07920
Assistant Secretary	412 Mt. Kemble Avenue
Jeff Tutnauer	Room C250
	Morristown, NJ 07960
Assistant Secretary	412 Mt. Kemble Ave.
Gary Wiggins	Room S209
	Morristown, NJ 07960
	DIRECTORS-
Director	131 Morristown Rd. Bldg.A Rm.A2035
Robert S. Feit	Basking Ridge, NJ 07920-1002
Director	295 N. Maple Avenue
Steven Garfinkel	Room 1211N3
	Basking Ridge, NJ 07920-1002
Director	295 N. Maple Avenue
John W. Thomson	Basking Ridge, NJ 07920