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<b>5.00</b> May Be	i
Added to Fees	

**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

DCUMENT # P04716					Jul 23, 2002 8:00 am Secretary of State					
E HORN	& HARDART COMPANY	, INC.		e l		07-23-2002 9	90333 01	2 ***55	50.00	
cipal Place of O HARBOR BL' EHAWKEN NJ (	VD.	Mailing Address 1500 HARBOR BLVD. WEEHAWKEN NJ 07087 US								
rincipal Place he Huds	of Business Pier	3. Mailing Address The Hudson R	iver P	ier						
Suite Apt. #, etc. 115 River Road		Suite, Apt. #, etc. 115 River Road			DO NOT WRITE IN THIS SPACE					_
ity & State Edgewat	er, New Jersey	City & State Edgewater, N		sey	4. FEI Number	13-2770055		No	plied For t Applicable	
7020	Country USA	Zip Cou 07020 U			5. Certificate of	Status Desired	اسا Fe	3.75 Add e Require		-
(	6. Name and Address of Current	negistered Agent		ame	/ mame and A	uuless ol item negi	oreren wat	····		1
201 HAYS S	ON SERVICE COMPANY STREET EE FL 32301-2525		S	treet Address (P	P.O. Box Number	is Not Acceptable)				-
MLUMINASSE	E FE 3230 1-2323		City			FL Zip Code				
This corporation		FILE NOW! After September 13 Make Check Payab	!! FEE IS , 2002 Fee ble to Depa	will be \$750.0	10. Elect	tion Campaign Finance: Fund Contribution.		Ádded	May Be to Fees	
ET ADDRESS   15	OFFICERS AND ARRISS, BRIAN C 500 HARBOR BLVD. EEHAWKEN NJ 07087	DIRECTORS	TITLE NAME STREET AL	Edw DDRESS The	sident ard M. La Hudson R	mbert iver Pier, lew Jersey O	115 R:	] Change	X Addition	R2F034 (4/02)
AS HI ET ADDRESS 12	AS Delete			AS Sar	ah Hewitt wn Raysma Third Av	: in Millstein enue	ξ Felde	d Change er & S	□ Addition	-
ET ADDRESS ST-ZIP		Delete Delete	TITLE NAME STREET AU CITY-ST-	DDRESS	York, Ne	w York 1002	22	] Change	☐ Addition	-
T ADDRESS		☐ Delete	TITLE NAME STREET AL				Ü	Change	Addition	
PRESS		☐ Delete	TITLE NAME STREET AG	DDRESS	10 M - 51 - 1		Ε	] Change	☐ Addition	
		☐ Delete	TITLE NAME STREET AG	DDRESS	- · · · ·		С	Change	Addition	

ertify 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 in 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 retrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if on an attachment with an address, with all other like empowered.

| In the 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 in 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 on an attachment with an address, with all other like empowered.

(212) 895-2000