

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P04775

1. Entity Name

COMPREHENSIVE CAPITAL CORPORATION

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90018 031 ***550.00

Principal Place of Business

1600 STEWART AVE.
STE. 704
WESTBURY, NY 11590
US

Mailing Address

1600 STEWART AVE.
STE. 704
WESTBURY, NY 11590
US

2. Principal Place of Business

1600 STEWART AVENUE

3. Mailing Address

1600 STEWART AVENUE

Suite, Apt. #, etc.

SUITE 405

Suite, Apt. #, etc.

SUITE 405

City & State

WESTBURY, N. Y.

City & State

WESTBURY, N. Y.

Zip

11590

Country

USA

Zip

11590

Country

USA

4. FEI Number

11-2251217

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KEVORKIAN, DEBORAH A
2255 GLADES RD.
STE 321A
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

GOLDBERG, STEVEN H.

Street Address (P.O. Box Number is Not Acceptable)

2255 GLADES ROAD

SUITE 321A

City

BOCA RATON

FL

Zip Code
33431

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

Steven Goldberg

STEVEN GOLDBERG

JULY 31, 2000

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 \$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 PD
NAME SCOPPA, OLGA E.
STREET ADDRESS 1600 STEWART AVE, STE. 704
CITY-ST-ZIP WESTBURY NY

☐ Delete

TITLE STVD
NAME KEVORKIAN, STEVEN V.
STREET ADDRESS 1600 STEWART AVENUE, SUITE 704
CITY-ST-ZIP WESTBURY NY 11590

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
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CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 1600 STEWART AVE, STE 405
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 1600 STEWART AVE, STE 405
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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:

Steven Kevorkian
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN KEVORKIAN CFO (516) 832-8600

Date

Daytime Phone #

CR2E034 (5/00)