

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P05707

1. Entity Name

AUTRANET, INC.

Principal Place of Business

C/O DLJ, INC. ATTN: CORP TAX
277 PARK AVE
NEW YORK NY 10172
US

Mailing Address

C/O DLJ, INC. ATTN: CORP TAX
277 PARK AVE
NEW YORK NY 10172
US

2. Principal Place of Business

277 Park Avenue

Suite, Apt. #, etc.

3. Mailing Address

c/o CSFB (USA), Inc.

Suite, Apt. #, etc.

277 Park Avenue, Attn: Tax Dept.

City & State

New York, NY

City & State

New York, NY

Zip

10172

Country

USA

Zip

10172

Country

USA

4. FEI Number

13-2961507

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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
VTM
COMPETIELLO, MARK A
277 PARK AVE
NEW YORK NY 10172 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
FONTANA, VICTOR J.
277 PARK AVE
NEW YORK NY 10172 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BOYD, MICHAEL A.
277 PARK AVENUE
NEW YORK NY ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
FORTE, LUGENE
277 PARK AVE
NEW YORK NY 10172 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
WHITE, MARJORIE S
277 PARK AVENUE
NEW YORK NY 10172 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/CEO/T/D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
Lori M. Russo
11 Madison Avenue,
New York, NY 10010 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP/CFO ☒ Change ☐ Addition

TITLE
NAME
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 a letter like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark A. Competiello

APR 27 2001

Date

(212) 892-4939

Daytime Phone #

CR2E034 (10/00)