

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P12571

1. Entity Name
HERZOG, HEINE, GEDULD, INC.

Principal Place of Business
525 WASHINGTON BLVD.
10TH FLOOR
JERSEY CITY NJ 07310
US

Mailing Address
525 WASHINGTON BLVD.
10TH FLOOR
JERSEY CITY NJ 07310
US

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 13-1955436

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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 \$550.00
After September 12, 2001 Fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
HERZOG, JOHN
1 PIEREPONT STREET
BROOKLYN NY ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVPD
GERACI, ANTHONY
ONE OYSTER BAY DR
RUMSON NJ ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
GEDULD, EMANUEL
279 CENTRAL PARK WEST, APT. 3B
NEW YORK NY ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVPS
CHRISTOFILIS, C. CHARLES
118 A HILLCREST AVE.
W. PATERSON NJ ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVPS
CHRISTOFILIS C. CHARLES
518 POPPY COURT
LANGHORNE, PA 19047 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
GEDULD, IRWIN
4000 ISLAND BLVD., WM IS
NO. MIAMI BEACH FL ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFO
BRADLEY, KEN
45 WHITNEY AVENUE
FLORAL PARK NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFO
BRADLEY, KEN
34 KILBURN RD
GARDEN CITY, NY 11530 ☒ 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 an other title or empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

C. CHARLES CHRISTOFILIS

7-12-01

201-418-4153



DO NOT WRITE IN THIS SPACE