

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90030 036 ***150.00

05/7234 AT

DOCUMENT # P31873

1. Entity Name

MASTECH SYSTEMS CORPORATION

Principal Place of Business

~~680 ANDERSON DRIVE~~
FOSTER PLAZA 10
PITTSBURGH PA 15220
US

Mailing Address

~~680 ANDERSON DRIVE~~
FOSTER PLAZA 10
PITTSBURGH PA 15220
US

2. Principal Place of Business

680 ANDERSEN DRIVE

Suite, Apt. #, etc.

3. Mailing Address

680 ANDERSEN DRIVE

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

25-1529755

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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, 2002 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 **PDST** ☐ Delete
NAME **TRIVEDI, ASHOK**
STREET ADDRESS ~~680 ANDERSON DR, FOSTER PLAZA 10~~
CITY-ST-ZIP **PITTSBURGH PA 15220**

TITLE **CD** ☐ Delete
NAME **WADHWANI, SUNIL**
STREET ADDRESS ~~680 ANDERSON DR, FOSTER PLAZA 10~~
CITY-ST-ZIP **PITTSBURGH PA 15220**

TITLE ~~GEO~~ ☒ Delete
NAME **HANEY, BRUCE**
STREET ADDRESS **680 ANDERSON DR, FOSTER PLAZA 10**
CITY-ST-ZIP **PITTSBURGH PA 15220**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **680 ANDERSEN DR, FOSTER PLAZA 10**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **680 ANDERSEN DR, FOSTER PLAZA 10**
CITY-ST-ZIP

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

TITLE ☐ Change ☒ Addition
NAME **V CEO**
STREET ADDRESS **ZUGAR, MICHAEL**
CITY-ST-ZIP **680 ANDERSEN DR, FOSTER PLAZA 10 PITTSBURGH, PA 15220**

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

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

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Zugar VP CEO 411-503-4450

Date

Daytime Phone #

CR2E034 (9/01)