

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P34184**

1. Entity Name

*Shields Capital Corporation*

FILED  
SECRETARY OF STATE  
TALLAHASSEE

01 JUN -4 PM 4:07

Principal Place of Business

*140 Broadway  
44th Floor  
New York, NY 10005*

Mailing Address

*140 Broadway  
44th Floor  
New York, NY*

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

*13-3625594*

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

*Lindenbaum, Philip  
2900 South Tamiami Trail  
Sarasota FL 34239*

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 *PD*  
NAME *Shields David V.* ☐ Delete  
STREET ADDRESS *131 E. 69th Street*  
CITY-ST-ZIP *New York, NY*

TITLE *CD*  
NAME *Shields Joseph V.* ☐ Delete  
STREET ADDRESS *152 Wheatley Road*  
CITY-ST-ZIP *Brookville NY*

TITLE *PD*  
NAME *Scarpa Ralph* ☐ Delete  
STREET ADDRESS *944 Maple Ave*  
CITY-ST-ZIP *Ridgefield, NJ 07637*

TITLE *CD*  
NAME *Hughes John P.* ☐ Delete  
STREET ADDRESS *2 Matthew Place*  
CITY-ST-ZIP *Mahwah NJ 07430*

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  
CITY-ST-ZIP

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

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

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

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:

*John P. Hughes*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*5/29/01*

Daytime Phone #

*212-300-5000*

**AD**

POSTED JOURNAL TRANSACTIONS BY SWDN WITHIN INITIATING OLO AND SITE

AUDIT LOCATION - STATEWIDE  
OLO 450000 - DEPARTMENT OF STATE  
SITE - NO TITLE

SWDN C1000029288 ADOCNO C000464

ACCOUNT CODE	CF	TC	OBJECT	AMOUNT	ACCOUNT CODE	BENEFITTING DATA	CF	TC	OBJECT
45 20 2 130001 45300100 00 000100 00		45	0010	150.00					
TRANSACTION CODE TOTAL - 45				150.00					

-2-

TK 96

453001

21

001015

000100

For 2001 Uniform Bureau Report for

Shields Capital Corp.

Deposited by Bankers Finance in error.