

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P40075

1. Entity Name  
IEIS, INC.

FILED  
Apr 09, 2001 8:00 am  
Secretary of State

04-09-2001 90021 001 \*\*\*150.00

Principal Place of Business  
427 TURNPIKE STREET  
CANTON MA 02021

Mailing Address  
427 TURNPIKE STREET  
CANTON MA 02021

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 04-2654231

Applied For

Not Applicable

Zip

Country

Zip

Country

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 SOUTH PINE ISLAND RD  
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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	PTD			
	WALDSTEIN, JOHN	97 MEADOWBROOK RD	NEEDHAM MA 02192	
	S			
	MYERSON, PETER	ONE STATE STREET	BOSTON MA 02109	
	D			
	PALEY, HEATH	34 TITCOMB LANE	AQUINDEL ME 04046	
	D			
	BALCOM, DIANE	905 SHARPSHILL RD.	PITTSBURGH PA 15215	
	D			
	MOYES, KENNETH	P O BOX 340	WAYLAND MA 01778	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Waldstein

Date

Daytime Phone #

3/30/01 (781) 821-5566

CR2E034 (10/00)