

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90100 006 ***150.00

0016040 AB

DOCUMENT # P40679

1. Entity Name
CITICORP INTERNATIONAL COMMUNICATIONS, INC.

Principal Place of Business
**1919 PARK AVE
 WEECHAUEN NJ 07087
 US**

Mailing Address
**1919 PARK AVE.. 5TH FL
 WEEHAWKEN NJ 07087**

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 **13-3108991**

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

**C T CORPORATION SYSTEM
 1200 SOUTH 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, 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 NAME STREET ADDRESS CITY-ST-ZIP	P BELEW, BILL 3851 QUEEN PALM DR. G3-01 TAMPA FL 33610 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NIEHOFF, EDWARD 909 THIRD AVENUE NEW YORK NY 10043 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FOSTER, PATTY 1919 PARK AVENUE, 5TH FLOOR WEEHAWKEN NJ 07087 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STIGLANESE, MIKE 399 PARK AVENUE NEW YORK NY 10043 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEVACQUA, FRANK 1919 PARK AVENUE, 5TH FLOOR WEEHAWKEN NJ 07087 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KEAVNEY, LUKE 68 MOLESWORTH ST LONDON SE13 -7EU ☒ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C ☒ Change ☐ Addition 399 Park Avenue New York, NY 10043
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ☒ 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 all other like empowered.

SIGNATURE *Patty Foster*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/02
 Date

201-601-7019
 Daytime Phone #

CR2E034 (9/01)