

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 29, 2001 8:00 am**  
**Secretary of State**  
03-29-2001 91023 001 11,745.50

**DOCUMENT # P96000026863**

1. Entity Name  
**ORH, INC.**

Principal Place of Business

Mailing Address

**2295 CORPORATE BOULEVARD NW  
STE 222  
BOCA RATON FL 33431**

**2295 CORPORATE BOULEVARD NW  
STE 222  
BOCA RATON FL 33431**

**66578**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0654630**

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

**THE HERRICK COMPANY, INC.  
2295 CORPORATE BOULEVARD NW  
STE 222  
BOCA RATON FL 33431**

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 \_\_\_\_\_ (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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DPST HERRICK, NORTON 2295 CORPORATE BOULEVARD NW BOCA RATON FL 33431	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
VAS HERRICK, HOWARD 20 COMMUNITY PLACE, 3RD FLOOR MORRISTOWN NJ 07960	<input type="checkbox"/> Delete	VAS Herrick Howard 2 Ridgedale Ave Ste 370 Cedar Knolls NJ 07927	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VAS HERRICK, MICHAEL 20 COMMUNITY PL MORRISTOWN NJ 07960	<input type="checkbox"/> Delete	VAS Herrick Michael 2 Ridgedale Ave Ste 370 Cedar Knolls NJ 07927	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	C Kermalli, Nisar 2 Ridgedale Ave, Ste 370 Cedar Knolls NJ 07927	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete	CFO. Kun, Robert 2 Ridgedale Ave, Ste 370 Cedar Knolls NJ 07927	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<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

Date

Daytime Phone #

**VP 3.22-01 561-241-9880**

CR2E034 (10/00)