2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P96000040412** 1. Entity Name INRAD MANAGEMENT, INC. Principal Place of Business Mailing Address 2999 NE 191ST ST 2999 NE 191ST ST STE 404 STE 404 AVENTURA FL 33180 AVENTURA FL 33180 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country 6. Name and Address of Current Registered Agent Name REGISTERED AGENT SERVICES CORPORATION 444 BRICKELL AVE.

Signature, typed or printed name of registered agent and tife if applicable.

% 1395 BRICKELL AVE. 8TH FLOOR

% 1395 BRICKELL AVE. 8TH FLOOR

% 1395 BRICKELL AVE. 8TH FLOOR

OFFICERS AND DIRECTORS

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

HARRARI, ERIC

MIAMI FL 33131

MIAMI FL 33131

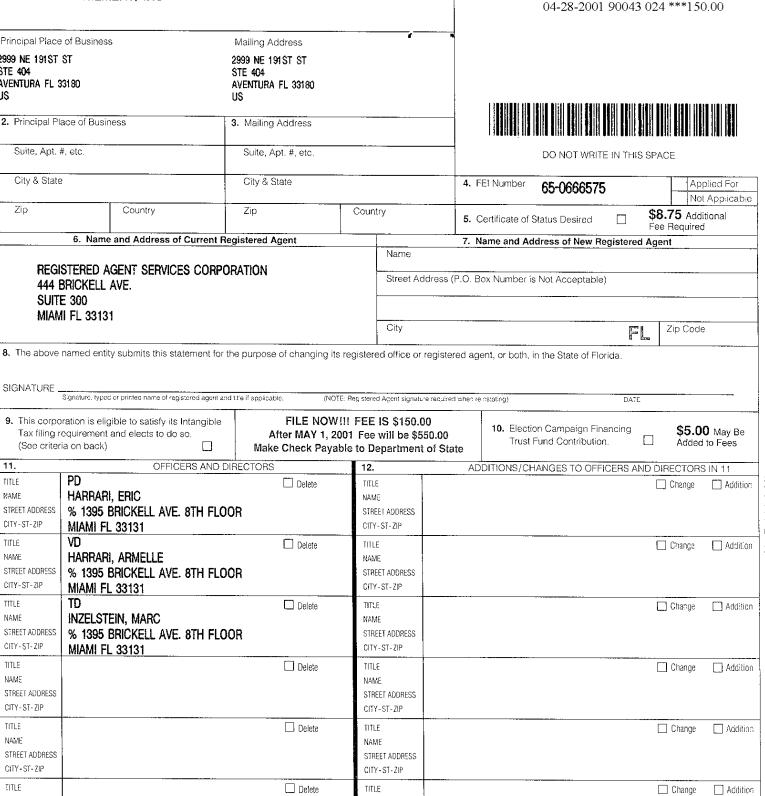
MIAMI FL 33131

INZELSTEIN, MARC

HARRARI, ARMELLE

Apr 28, 2001 8:00 am Secretary of State

04-28-2001 90043 024 ***150.00



13. Thereby certify that the information supplied with this filling 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.

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

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SIGNATURE:

SUITE 300 MIAMI FL 33131

(See criteria on back)

PD

TD

SIGNATURE

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TITLE

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MAME STREET ADDRESS

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NAME

STREET ADORESS

STREET ADDRESS

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO