

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000058014

1. Entity Name
RAMP DESIGN STUDIOS, INC.

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91241 002 ***150.00

Principal Place of Business

50 WASHINGTON STREET
SUITE 1211
NORWALK CT 06854

Mailing Address

50 WASHINGTON STREET
SUITE 1211
NORWALK CT 06854

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 65-0786413

Applied For
Not Applicable

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
C/O 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 PD
NAME GREENBERG, KENNETH S
STREET ADDRESS 1266 EAST MAIN STREET
CITY-ST-ZIP NORWALK CT 06854 ☐ Delete

TITLE
NAME
STREET ADDRESS 50 Washington St, Suite 1211
CITY-ST-ZIP South Norwalk, Ct 06854 ☒ Change ☐ Addition

TITLE VPD
NAME MALLIN, NOAH
STREET ADDRESS 110 EAST 59 STREET
CITY-ST-ZIP NEW YORK NY 10022 ☐ Delete

TITLE
NAME
STREET ADDRESS 50 Washington St, Suite 1211
CITY-ST-ZIP South Norwalk, Ct 06854 ☒ Change ☐ Addition

TITLE TD
NAME DUNN, SCOTT C
STREET ADDRESS 50 WASHINGTON STREET
CITY-ST-ZIP NORWALK CT 06854 ☐ Delete

TITLE
NAME
STREET ADDRESS 50 Washington St, Suite 1211
CITY-ST-ZIP South Norwalk, Ct 06854 ☒ Change ☐ Addition

TITLE S
NAME MASUD, DALI
STREET ADDRESS 110 EAST 59 STREET
CITY-ST-ZIP NEW YORK NY 10022 ☐ Delete

TITLE
NAME
STREET ADDRESS 50 Washington St, Suite 1211
CITY-ST-ZIP South Norwalk, Ct 06854 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/03/01

Date

863-359-0722

Daytime Phone #

CR2E034 (10/00)