

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000062269

FILED
Jan 09, 2002 8:00 AM
Secretary of State

Entity Name: SATKIN INC.

Current Principal Place of Business:

1855 N.E. 12TH AVENUE
SUITE A
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

1855 N.E. 12TH AVENUE
SUITE A
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: 06-0761969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: PAUL WALTER,
Address: 109 N 5TH ST
City-St-Zip: SADDLE BROOK, NJ 07663

Title: VP () Delete
Name: DANIEL J MAHON,
Address: 109 N 5TH ST
City-St-Zip: SADDLE BROOK, NJ 07663

Title: P () Delete
Name: JEFF MUNNIS,
Address: 109 N 5TH ST
City-St-Zip: SADDLE BROOK, NJ 07663

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: CAROL P WALLACE,
Address: 33 REEDS GAP ROAD
City-St-Zip: MIDDLEFIELD, CT 06455 US

Title: S (X) Change () Addition
Name: CAROL DUPLESSIS,
Address: 33 REEDS GAP ROAD
City-St-Zip: MIDDLEFIELD, CT 06455 US

Title: T (X) Change () Addition
Name: ROBERT S KRUGLIK,
Address: 33 REEDS GAP ROAD
City-St-Zip: MIDDLEFIELD, CT 06455 US

Title: V () Change (X) Addition
Name: JON A ESPING,
Address: 33 REEDS GAP ROAD
City-St-Zip: MIDDLEFIELD, CT 06455 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT S. KRUGLIK

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01/09/2002

Electronic Signature of Signing Officer or Director

Date