

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000106060

1. Entity Name

INTERNATIONAL GUILD OF VERBATIM REPORTERS, INC.

Principal Place of Business

3762 NE 209TH TERRACE  
AVENTURA FL 33180

Mailing Address

SUITE 3400-ONE BISCAYNE TOWER  
TWO SOUTH BISCAYNE BLVD  
MIAMI FL 33131-1897

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 65-0834325

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

VALDES-FAULI CORPORATE SERVICES, INC.  
SUITE 3400-ONE BISCAYNE TOWER  
TWO SOUTH BISCAYNE BLVD  
MIAMI FL 33131-1897

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 CZERENDA, RANDALL A  
STREET ADDRESS 3762 NE 209TH TERRACE  
CITY-ST-ZIP AVENTURA FL 33180 ☐ Delete

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

TITLE D  
NAME WENCLAWSKI, JOHN  
STREET ADDRESS 1500 BISCHOP COURT  
CITY-ST-ZIP MT. PROSPECT IL 60056 ☐ Delete

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

TITLE DT  
NAME GARAPATI, PRASAD V.S.S.  
STREET ADDRESS DAMAYANDU CHAMERS 1ST FLOOR RITZ HOTEL RD  
CITY-ST-ZIP ADARSH NAGAR HYDERABAD INDIA 500-063 ☐ Delete

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

TITLE DS  
NAME CZERENDA, A. JUDITH  
STREET ADDRESS 3762 NE 209TH TERRACE  
CITY-ST-ZIP AVENTURA FL 33180 ☐ Delete

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

TITLE D  
NAME MEDICI, WAGNER  
STREET ADDRESS AVENIDA PAULISTA 1471 SALAS 1 412/1 415  
CITY-ST-ZIP ANDAR14 SAOPAULO SPCEPBRASIL 01311-927 ☒ Delete

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

TITLE D  
NAME BESS, THOMAS  
STREET ADDRESS 99 BATTERY PLACE APT 18E  
CITY-ST-ZIP NEW YORK NY 10280 ☒ Delete

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

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

RANDALL A. CZERENDA  
PRES.

Date

Daytime Phone #

FILED  
Apr 17, 2001 8:00 am  
Secretary of State

04-17-2001 90131 042 \*\*\*150.00

642359



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)