

2001 UNIFORM BUSINESS REPORT (UBR)

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

05-18-2001 90011 012 ***150.00

DOCUMENT # P97000107191

1. Entity Name

RAHA ASSOCIATES II, INC.

Principal Place of Business

Mailing Address

708 THIRD Avenue - 28th Floor 708 Third Ave 28th A
 New York, New York 10017 New York NY 10017

2. Principal Place of Business

708 Third Avenue 28th Fl

3. Mailing Address

708 Third Ave 28th Floor

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

New York NY

City & State

New York NY

4. FEI Number

58-2363738

Applied For

Not Applicable

Zip

10017

Country

USA

Zip

10017

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

A0063541

6. Name and Address of Current Registered Agent

Gragg, K. Lawrence
 200 S Biscayne Blvd.
 Suite 4900
 Miami FL 33131

7. Name and Address of New Registered Agent

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 15, 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

TITLE	P	<input type="checkbox"/> Delete
NAME	Benenson, Charles B.	
STREET ADDRESS	708 Third Ave 28 th FL	
CITY-ST-ZIP	New York NY 10017	
TITLE	VT	<input type="checkbox"/> Delete
NAME	DiNome, Anthony J	
STREET ADDRESS	708 Third Ave 28 th FL	
CITY-ST-ZIP	New York NY 10017	
TITLE	S	<input type="checkbox"/> Delete
NAME	Celnick, Martin	
STREET ADDRESS	708 Third Ave 28 th FL	
CITY-ST-ZIP	New York NY 10017	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (11/00)

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 reports 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 appointed 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 same status, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin Celnick

4/25/01

Date

(212) 716-9076

Daytime Phone #