

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State
 05-14-2002 90018 001 ***158.75

DOCUMENT # S44828

1. Entity Name

WEBSTER/SYGNE CORPORATION

Principal Place of Business

**9450 S W 72ND ST
 STE 100 D
 MIAMI FL 33173
 US**

Mailing Address

**9450 S W 72ND ST
 STE 100 D
 MIAMI FL 33173
 US**

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

65-0255697

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

REICH, DONALD

**9450 SW 72ND ST, #104 100D
~~SUITE 100~~
 MIAMI FL 33173**

Name

REICH, DONALD

Street Address (P.O. Box Number is Not Acceptable)

9450 S.W. 72ND ST. SUITE 100D

City

MIAMI

FL

Zip Code

33173

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, 2002 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 **C** ☐ Delete
 NAME **HALL, RUTH C**
 STREET ADDRESS **22 HILLSIDE TERRACE**
 CITY-ST-ZIP **PACKANACK LAKE NJ**

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

TITLE **D** ☐ Delete
 NAME **PLAZA, LILY**
 STREET ADDRESS **10808 S.W. 72 ST #134**
 CITY-ST-ZIP **MIAMI FL**

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

TITLE **PD** ☐ Delete
 NAME **PLAZA, RUBEN**
 STREET ADDRESS **10808 S.W. 72 ST #134**
 CITY-ST-ZIP **MIAMI FL**

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

TITLE **VP** ☐ Delete
 NAME **PUTIGNANO, WENDY H**
 STREET ADDRESS **58A HOBART STREET**
 CITY-ST-ZIP **HACKENSACK NJ**

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

TITLE **T** ☐ Delete
 NAME **DAMBROSIO, FRANK**
 STREET ADDRESS **43 AMHERST DRIVE**
 CITY-ST-ZIP **BAYVILLE NJ**

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

TITLE **S** ☐ Delete
 NAME **REICH, DONALD**
 STREET ADDRESS **40 W. RIDGEWOOD AVENUE**
 CITY-ST-ZIP **RIDGEWOOD NJ**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02 (305) 412-1060
 Date Daytime Phone #

CR2E034 (9/01)