

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90019 001 ***158.75

DOCUMENT # V21003

1. Entity Name
HEALTH WATCH, INC.

Principal Place of Business

**777 YAMATO RD
 SUITE 350
 BOCA RATON FL 33431**

Mailing Address

**3 EXECUTIVE CAMPUS
 2ND FLOOR SOUTH
 CHERRY HILL NJ 08002**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0317442

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**QUEEN, JEFFREY
 777 YAMATO RD
 SUITE 350
 BOCA RATON FL 33431**

Name

James Papa - President

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

777 Yamato RD

Suite 350

City

Boca Raton

FL

Zip Code

33431

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 **P** ☒ Delete
 NAME **QUEEN, ANDREW**
 STREET ADDRESS **777 YAMATO RD, #350**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **Trustee** ☐ Change ☒ Addition
 NAME **Morten C Batt**
 STREET ADDRESS **3 Executive Campus, 2nd fl south**
 CITY-ST-ZIP **Cherry Hill, NJ 08002**

TITLE **CEO** ☒ Delete
 NAME **QUEEN, JEFFREY**
 STREET ADDRESS **777 YAMATO RD, #350**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **President** ☐ Change ☒ Addition
 NAME **James V. Papa**
 STREET ADDRESS **777 Yamato Rd., Suite #350**
 CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE **CFO** ☒ Delete
 NAME **DORRIS, DONNA**
 STREET ADDRESS **3 EXECUTIVE CAMPUS, 2ND FL-SOUTH**
 CITY-ST-ZIP **CHERRY HILL NJ 08002**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
 NAME
 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

MORTON C. BATT

Date

Daytime Phone #

1/31/02

CR2E034 (9/01)