

# 2002 UNIFORM BUSINESS REPORT (UBR)

0110983 AT

**DOCUMENT # 258574**  
**1. Entity Name**  
**G.I.B. INC.**

**FILED**  
**02 SEP -9 PM 2:34**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

<b>Principal Place of Business</b> C/O DAVID BERDON & CO. LLP 415 MADISON AVENUE NEW YORK NY 10017 US	<b>Mailing Address</b> C/O DAVID BERDON & CO. LLP 415 MADISON AVENUE NEW YORK NY 10017 US
---	---



<b>2. Principal Place of Business</b> C/O BERDON LLP Suite, Apt. #, etc. 360 MADISON AVE 6TH FL. City & State NEW YORK, NY Zip 10017 Country USA	<b>3. Mailing Address</b> C/O BERDON LLP Suite, Apt. #, etc. 360 MADISON AVE 6TH FL. City & State NEW YORK, NY Zip 10017 Country USA
---	---

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**  
**NATIONAL CORPORATE RESEARCH, LTD., INC.**  
**1406 HAYS STREET, SUITE 2**  
**TALLAHASSEE FL 32301**

**4. FEI Number** 34-6542314  
 Applied For  
 Not Applicable

**5. Certificate of Status Desired**  **\$8.75 Additional Fee Required**

**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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE** \_\_\_\_\_ (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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>KOTLER, STUART B</b> <b>415 MADISON AVENUE</b> <b>NEW YORK NY 10017</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>KOTLER, STUART B</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>360 MADISON AVE, 6TH FL.</b> <b>NEW YORK, NY 10017</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>200007663352--6</b> <b>-09/11/02--01046--023</b> <b>****150.00 ****150.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 REQUIRED **8/21/02**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)



August 28, 2002

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: GIB Incorporated  
EIN: 34-6542314  
Tax Year: 2002

Dear Sir/Madam:

Our client, the above referenced taxpayer has received notice from the Florida Department of State that a Uniform Business Report was not filed with the required annual fee. According to the notice received by the taxpayer, GIB Incorporated did not file the Uniform Business Report by May 1, 2002, and therefore is subject to a \$400.00 late payment fee. On behalf of GIB incorporated, we request that the \$400.00 late payment fee be abated.

Enclosed please find a check in the amount of \$150.00 representing payment of the annual fee due to the Department of State.

GIB Incorporated's failure to remit the \$150.00 fee timely was unintentional and not due to willful neglect. Pursuant to Florida Statute §607.1622(5), the annual Uniform Business Report must be filed by May 1 of the year that a corporation is doing business in the State of Florida. We contacted the Division of Corporations to determine when notice is given to corporations that the fee is due. We were informed that notices indicating that a fee is due are sent in January, and notification that the fees have not been paid is sent in August.

GIB Incorporated did not receive notice in the month of January that payment of fees and filing of the annual report were forthcoming. All correspondence regarding this client is sent c/o Berdon LLP. Our firm moved during the month of January in 2002. When we contacted the Division of Corporations recently, it was determined that notice and the Uniform Business Report were sent to our prior address. The Division of Corporations stated that no forwarding address was provided. However, all other correspondence had been correctly forwarded and received at our firm's new address. Moreover, non-receipt of forwarded mail at the firm's new address is extremely rare. Therefore, some error occurred in mailing that caused GIB Incorporated to not receive notice in January.



Please send any further correspondence concerning GIB Incorporated to the following address:

GIB Incorporated  
Attention: Stuart Kotler  
c/o Berdon LLP  
360 Madison Avenue  
New York, NY 10017

Based on the above explanation, we request the \$400.00 late payment fee be abated. We believe that failure to file the Uniform Business Report timely was unintentional and was not due to intentional disregard of Florida law. GIB Incorporated is now aware of and will comply with all filing requirement in the State of Florida. For these reasons, it is respectfully requested that the \$400.00 fee for late payment be abated.

Very truly yours,

Lisa B. Knee

LBK:fp

Enclosure

Certified Mail RRR 7104 6163 4990 0000 3557