2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9900004621 1. Entity Name					01-25-2001 90258 002 ***900.00 FILED F99000004621		
CALL SCIENCES, INC.				SECRETARY OF STATE DIVISION OF CORPORATIONS			
Principal Pla	ce of Business	Mailing Address	<u> </u>		01 FEB -2 AM 10: 08		
,	LL STREET. SUITE 1100	379 THORNALL STREET. SUITE 1100 EDISON NJ 08837					
2. Principal	3. Mailing Address	alling Address					
Suite, Apt. #, etc.		Suite. Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State			4. FEI Number 1 22-2277747 8 V U S V U Applied For		
Zip Country		Zip Country		try	5. Certificate of Status Desired \$8.75 Additional		
-	6. Name and Address of Current R	registered Agent			7. Name and Address of New Registered Agent		
				Name	,		
CORPORATION SERVICE COMPANY 1201 HAYS STREET			Street Addre	ess (P.O. Box Number is Not Acceptable)			
TAI	LLAHASSEE FL 32301-2525						
				City	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 typed or critical registered floridated flor							
Tax filing requirement and elects to do so. (See criteria on back) After SEPTEMBER 13, 2000 Min. will be \$7. Make Check Payable to Department of St				State Added to Fees			
TITLE	OFFICERS AND D	DELETORS DELETE	12.	P	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
NAME STREET ADDRESS	WASSERSON, GARY J 534 RIGHTERS MILL ROAD		NAME	· •	ichael mcCoy 181 James Way Nyckott, NJ 07481		
CITY-ST-ZIP	PENN VALLEY PA 19072			ST-ZIP	Nyckott, NJ 07481		
TITLE NAME STREET ADDRESS ;CITY-ST=ZIP	11 DUOCKSIDE DRIVE	☐ Delete		TADORESS 3	obert Hemmen 19 Dale Avenue		
TITLE	GLADSTONE NJ 07934	Delete	TITLE	3			
NAME STREET ADDRESS	SERVIDIO, ANTHONY 20 CLEVELAND AVENUE			TADDRESS 3	Bucking ham Oring		
CITY-ST-ZIP	COLONIA NJ 07067 CD	☐ Delate	CITY-:	ST-ZIP P	rin coton NJ 08540		
NAME	CHATTERJEE, PURNENDU		NAME		☐ Change ☐ Addition		
STREET ADDRESS : CITY-ST-ZIP	320 CENTRAL PARK WEST, APT. NEW YORK NY 10025	. 19-A	STREET CITY-S	T AODRESS ST-ZIP	·		
TITLE NAME	D	☐ Delete	TITLE		☐ Change ☐ Addition		
STREET ADDRESS	ADVANI, DILIP 167TH EAST 61ST STREET		NAME STREET	ADDRESS	100/2-		
CITY-ST-ZIP TITLE	NEW YORK NY 10021		CITY-S	ST-ZIP	#II.M		
NAME	. D Chatterjee, Pallab	☐ Delete	TITLE NAME		Change Addition		
STREET ADDRESS CITY-ST-ZIP	5805 GLEN HEATHER DALLAS TX 75252		STREET City-s	ADDRESS			
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 TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1/10/6/ 732-632-632-630							

1/29/01