

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90068 003 ***150.00

0618788 AT

DOCUMENT # P04486

1. Entity Name
SUECIA INSURANCE COMPANY

Principal Place of Business 25 SMITH STREET NANUET NY 10954 US	Mailing Address 25 SMITH STREET NANUET NY 10954 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 13-3031274		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
CORPORATE SERVICES COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CD <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PEDERSEN, ZAID	NAME	Dobson, Gordon
STREET ADDRESS	FLEMINGGATAN 18	STREET ADDRESS	335 West Shore Dr.
CITY-ST-ZIP	STOCKHOLM, SWEDEN	CITY-ST-ZIP	Wyckoff, NJ 07481
TITLE	SD <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANSEHL, ROBERT	NAME	Gottesman, Scott
STREET ADDRESS	211 WHIPPOWILL ROAD	STREET ADDRESS	6 Harrison Court
CITY-ST-ZIP	CHAPPAQUA NY	CITY-ST-ZIP	Cortlandt Manor, NY 10567
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BARSK, ANDERS	NAME	Murphy, George
STREET ADDRESS	300 EAST 56TH STREET	STREET ADDRESS	22 Dorchester Rd.
CITY-ST-ZIP	NEW YORK NY	CITY-ST-ZIP	Rockville Centre, NY 11570
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRANDIN, AKE	NAME	Faxner, Goran
STREET ADDRESS	321 HIGHLAND AVENUE	STREET ADDRESS	Fleminggatan 18
CITY-ST-ZIP	OSSINING NY 10562	CITY-ST-ZIP	Stockholm, Sweden S-106 26
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAHLING, E. GUNTER	NAME	
STREET ADDRESS	49 HEMLOCK DRIVE	STREET ADDRESS	
CITY-ST-ZIP	SLEEPY HOLLOW NY	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DALY, J. LEO	NAME	
STREET ADDRESS	763 PAPE AVENUE	STREET ADDRESS	
CITY-ST-ZIP	TORONTO ON M4-K3T2	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: **REQUIRED** **SCOTT GOTTESMAN** 2/12/02 845-624-7780
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)