

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 02, 2001 8:00 am**  
**Secretary of State**

05-02-2001 90135 020 \*\*\*150.00

**DOCUMENT # F98000004382**

1. Entity Name  
**IDT AMERICA, CORP.**

Principal Place of Business  
**190 MAIN ST  
 HACKENSACK NJ 07601**

Mailing Address  
**190 MAIN ST  
 HACKENSACK NJ 07601**

2. Principal Place of Business  
**520 Broad Street**

3. Mailing Address  
**520 Broad Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Newark, NJ**

City & State  
**Newark, NJ**

Zip  
**07102**

Country

Zip  
**07102**

Country

4. FEI Number **22-3312697**

Applied For  
 Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required



DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND  
 PLANTATION FL 33324**

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

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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>CCEO</b> <b>JONAS, HOWARD S</b> <b>294 STATE ST.</b> <b>HACKENSACK NJ 07601</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CCOO</b> <b>BALTER, HOWARD S</b> <b>294 STATE ST.</b> <b>HACKENSACK NJ 07601</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP</b> <b>COURTER, JAMES A</b> <b>294 STATE ST.</b> <b>HACKENSACK NJ 07601</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DV</b> <b>KNOLLER, MARC</b> <b>294 STATE ST.</b> <b>HACKENSACK NJ 07601</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS</b> <b>MASON, JOYCE J</b> <b>294 STATE ST.</b> <b>HACKENSACK NJ 07601</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DV</b> <b>BRECHER, HAL</b> <b>294 STATE ST.</b> <b>HACKENSACK NJ 07601</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED ANNEX A</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	<input checked="" 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:

*Joyce J. Mason*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Joyce J. Mason**

**4/25/01**

**973-438-1000**

Date

Daytime Phone #

CR2034 (10/00)

DOCUMENT

# F98000004382

ANNEX A

544580

IDT America. Corp. Directors

Howard S. Jonas, Chairman  
James A. Courter, Director  
Marc E. Knoller, Director  
Hal Brecher, Director

IDT America. Corp. Officers

Howard S. Jonas, Chief Executive Officer & Treasurer  
James A. Courter, President  
Joyce J. Mason, Secretary  
Stephen R. Brown, Chief Financial Officer  
Hal Brecher, Executive Vice President of Operations  
Doug Mauro, Sr. Vice President

All of the above are located at:  
520 Broad Street  
Newark, New Jersey 07102-3111