

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 19, 2004 8:00 am**  
**Secretary of State**

03-19-2004 90045 043 \*\*\*150.00

DOCUMENT # F00000003161

1. Entity Name  
CO-NECT, INC.



Principal Place of Business  
37 BROADWAY  
ARLINGTON, MA 02474

Mailing Address  
37 BROADWAY  
ARLINGTON, MA 02474

54019908



2. Principal Place of Business  
625 Mt. Auburn Street  
Suite, Apt. #, etc.

3. Mailing Address  
625 Mt. Auburn Street  
Suite, Apt. #, etc.

03022004 Chg-P CR2E034 (10/03)

City & State  
Cambridge, MA

City & State  
Cambridge, MA

4. FEI Number  
52-2130999

Applied For  
Not Applicable

Zip  
02138

Country  
USA

Zip  
02138

Country  
USA

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PCEO  
NAME SKOLER, ANDREW ☐ Delete  
STREET ADDRESS 37 BROADWAY  
CITY-ST-ZIP ARLINGTON, MA 02474

TITLE VD  
NAME GOLDBERG, BRUCE ☐ Delete  
STREET ADDRESS 37 BROADWAY  
CITY-ST-ZIP ARLINGTON, MA 02474

TITLE D  
NAME MIXER, DAVID ☐ Delete  
STREET ADDRESS 70 PEASANT DR.  
CITY-ST-ZIP EAST GREENWICH, RI 02818

TITLE CFO  
NAME QUINTANA, JOSE ☐ Delete  
STREET ADDRESS 37 BROADWAY  
CITY-ST-ZIP ARLINGTON, MA 02474

TITLE D  
NAME BONANNO, ANDREW ☒ Delete  
STREET ADDRESS 120 LONGRIDGE RD.  
CITY-ST-ZIP STAMFORD, CT 06927

TITLE D  
NAME MENICHELLI, VINCENT ☐ Delete  
STREET ADDRESS 435 DEVON PARK DR., BLDG. 600  
CITY-ST-ZIP WAYNE, PA 19087

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C  
NAME John Kim ☐ Change ☒ Addition  
STREET ADDRESS 292 Franklin Street  
CITY-ST-ZIP Newton, MA 19087

TITLE D  
NAME Briankeli ☐ Change ☒ Addition  
STREET ADDRESS 120 Ridge Road  
CITY-ST-ZIP Stamford, CT 06927

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

12. 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 10 or Block 11 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

Jose Quintana, CFO

3/3/04

Date

617-945-3100

Daytime Phone #