SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $223 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -4 AM 10:23

DOCUMENT # **504614** **(9)**

1. Corporation Name

DADE INVESTMENT SERVICES, INC.

Principal Place of Business	Mailing Address
75 STATE STREET MABOF 31 B BOSTON MA 02106-2197 US	75 STATE STREET MABOF 31 B BOSTON MA 02106-2197 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/21/1976
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 04-2606044 ☐ Applied For ☐ Not Applicable

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

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

8. The corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City FL 65 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~D~~	1.1 TITLE	D	☑ Change ☐ Addition
NAME	~~GIRO, DEROSA~~	1.2 NAME	Mutterperl, William C	
STREET ADDRESS	~~275 ANGELL ST.~~	1.3 STREET ADDRESS	50 Kennedy Plaza	
CITY-ST-ZIP	~~PROVIDENCE RI~~	1.4 CITY-ST-ZIP	Providence, RI	
TITLE	PD	2.1 TITLE		☐ Change ☐ Addition
NAME	BREITMAN, LEO R	2.2 NAME		
STREET ADDRESS	75 STATE STREET, MABOF 29 A	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA	2.4 CITY-ST-ZIP		
TITLE	T	3.1 TITLE	T	☑ Change ☐ Addition
NAME	~~PECK, JAMES M.~~	3.2 NAME	DeRosa, Giro	
STREET ADDRESS	75 STATE STREET, MABOF 10C	3.3 STREET ADDRESS	75 State St, MABOF 10C	
CITY-ST-ZIP	BOSTON MA	3.4 CITY-ST-ZIP	Boston, MA	
TITLE	~~C~~	4.1 TITLE	S	☑ Change ☐ Addition
NAME	BIZAR, AMY W	4.2 NAME		
STREET ADDRESS	75 STATE STREET, MABOF 31 B	4.3 STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☑ Change ☐ Addition
NAME	SARLES, H. JAY	5.2 NAME		
STREET ADDRESS	~~60 EDMUNDS ROAD~~	5.3 STREET ADDRESS	50 Kennedy Plaza	
CITY-ST-ZIP	~~WELLESLEY MA~~	5.4 CITY-ST-ZIP	Providence, RI	
TITLE		6.1 TITLE	A/S	☐ Change ☑ Addition
NAME		6.2 NAME	Francis, M. Rebecca	
STREET ADDRESS		6.3 STREET ADDRESS	111 Westminster St.	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Providence, RI	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Amy W. Bizar Secretary 7/31/95 617-346-3131
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)

0174470 FP