

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90282 001 ***150.00

DOCUMENT # F01000000480

1. Entity Name
EMPIRIX INC.



Principal Place of Business
**20 CROSBY DR
BEDFORD, MA 01730**

Mailing Address
**20 CROSBY DR
BEDFORD, MA 01730**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04112006

Chg-P

CR2E034 (11/05)

4. FEI Number
04-3530061

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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. 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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
D'ARBELOFF, ALEXANDER V
77 MASSACHUSETTS AVE., BLDG. 5, ROOM 205
CAMBRIDGE, MA 02139** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
GOLDFINGER, EDWARD
20 CROSBY DRIVE
BEDFORD, MA 01730** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DEYSHER, CYNTHIA
28 GUZZLE BROOK DRIVE
SUDBURY, MA 01776** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BARROWS, TIMOTHY
1000 WINTER STREET, SUITE 4500
WALTHAM, MA 02451** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROBBINS, OWEN
199 COUNTRY DRIVE
SUDBURY, MA 01776** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FERRI, PAUL
1000 WINTER STREET, SUITE 4500
WALTHAM, MA 02451** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**D
JOHN GUTAG
77 MASSACHUSETTS AVE., BUILDING 32, ROOM 6966
CAMBRIDGE, MA 02139**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Date

Daytime Phone #

4/11/06 (781) 266-3445