

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003661

Entity Name: OCE IMAGISTICS INC.

FILED  
May 06, 2010  
Secretary of State

**Current Principal Place of Business:**

100 OAKVIEW DRIVE  
TRUMBULL, CT 06611

**New Principal Place of Business:**

**Current Mailing Address:**

100 OAKVIEW DRIVE  
TRUMBULL, CT 06611

**New Mailing Address:**

FEI Number: 06-1611068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SKRZYPCZAK, JOSEPH  
Address: 100 OAKVIEW DRIVE  
City-St-Zip: TRUMBULL, CT 06611

Title: VP  
Name: VANDONINCK, ERIK  
Address: 100 OAKVIEW DR  
City-St-Zip: TRUMBULL, CT 06611

Title: AT  
Name: CACACE, MARIO  
Address: 100 OAKVIEW DR  
City-St-Zip: TRUMBULL, CT 06611

Title: S  
Name: MARINO, ANTHONY J  
Address: 100 OAKVIEW DRIVE  
City-St-Zip: TRUMBULL, CT 06611

Title: D  
Name: REILLY, JOHN  
Address: 100 OAKVIEW DRIVE  
City-St-Zip: TRUMBULL, CT 06611

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARIO CACACE

AT

05/06/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date