2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# F07000003987

Entity Name: BIOMETRICA SYSTEMS, INC.

Current Principal Place of Business:

296 CONCORD RD. 3RD FLOOR
BILLERICA, MA 01821

New Principal Place of Business:

177 BROAD STREET
12TH FLOOR
STAMFORD, MA 06901

Current Mailing Address:

P.O. BOX 5189
BILLERICA, MA 01822

New Mailing Address:

177 BROAD STREET
12TH FLOOR
STAMFORD, MA 06901

FEI Number: 02-0497331 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CHRM ( ) Delete
Name: LA PENTA, ROBERT V
Address: 177 BROAD STREET
City-St-Zip: STAMFORD, CT 06901

Title: P ( ) Delete
Name: SCHMITT, ROBERT J JR.
Address: 296 CONCORD RD.
City-St-Zip: BILLERICA, MA 01821

Title: ST ( ) Delete
Name: SULLIVAN, LEO J
Address: 296 CONCORD RD.
City-St-Zip: BILLERICA, MA 01821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change ( ) Addition
Name: LA PENTA, ROBERT V
Address: 177 BROAD STREET
City-St-Zip: STAMFORD, CT 06901

Title: P (X) Change ( ) Addition
Name: SCHMITT, ROBERT J JR.
Address: 177 BROAD STREET
City-St-Zip: STAMFORD, CT 06901

Title: ST (X) Change ( ) Addition
Name: SULLIVAN, LEO J
Address: 177 BROAD STREET
City-St-Zip: STAMFORD, CT 06901

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LEO SULLIVAN S 04/30/2009
Electronic Signature of Signing Officer or Director Date