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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996 DIVISION OF CORPORATIONS DOCUMENT # F9300001358 (1) 1. Corporation Name PELLON CORPORATION				1 210 (112 1110 1121) 112 (112 112)	11 83 111 8 811 88 16 1486 188	Pr Brital (1811 (182)
nopal Place of Business 20 INDUSTRIAL AVENUE		Mailing Address 20 NDUSTRIAL AVENUE				
CHELMSFOR	RD MA 01824	CHELMSFORD MA (01824			
				3. Date incorporated or Qualified 03/18/1993	3a. Date of Last R 03/30/19	eport 95
Panoipal Pla	ace of Business	2a. Mailing Address		4. FEI Number 04-2710458		Applied For
Suite, Apl.	#, etc.	Suite, Apt #, etc.			\$8.75	Not Applicable Additional
Cal., 9 Cash		[27]		5. Certificate of Status Desired	* I	Required
City & State	3	City & State		Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Ζip	Country	Zip	Country	8. This corporation has liability for	Audec	
	25 9. Name and Address of Curre	29 ent Begistered Agent	30		□No	
	o, inches and readings of control	on registered Agent	81 Name	10. Name and Address of New R	registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				dress (P.O. Box Number is Not Acceptab	ole)	
PLANA	TATION FL 33324		83			
			84 City		FL 85 Zip	Code
familiar wit	to the provisions of Sections 607.050 ed agent, or both, in the State of Flotth, and accept the obligations of, Section 2015.	moa. Such change was aumor	azed by the comporation's hos	oration submits this statement for the pur ard of directors. I hereby accept the appr		egistered offic agent. I am
familiar wit	th, and accept the obligations of, Se	otion 607.0505, Florida Statuti oti and steed accessable (I	NOTE: Registered Againt signature requir	ard of directors. I hereby accept the appo	pose of changing its roomment as registered DATE ICERS AND DIRECTO	agent. I am RS IN 12
familiar wit	th, and accept the obligations of, Se Signature typodorprotection and orange decision OFFICERS A	otion 607.0505, Florida Statuti	NOTE: Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	and of directors. I hereby accept the appointment of directors.	rpose of changing its ro ointment as registered	agent. I am
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Darliers
O TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96 508-454-0461
Date Daytime Proce #