

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F93000005501 (2)

1. Corporation Name

WRAY-TECH INSTRUMENTS INC.



Principal Place of Business

555 LORDSHIP BLVD.
STRATFORD CT 06497

Mailing Address

555 LORDSHIP BLVD.
STRATFORD CT 06497

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

GRASSANO, N. RICHARD
% GRASSANO & WRIGHT, PA
1515 N. FEDERAL HWY., #210
BOCA RATON FL 33432

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

3. Date Incorporated or Organized

12/03/1993

3a. Date of Last Report

02/28/1995

4. FEI Number

76-0227899

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

10. Name and Address of New Registered Agent

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 607.0509, Florida Statutes.

SIGNATURE

Signature typed or printed in block letters, in full, and in ink.

Printed name of agent, in full, and in ink.

Date

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PD ARSON, ARNALDO M
555 LORDSHIP BLVD.
STRATFORD CT

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

VPDS WRAY, DAVID
26 COVE ST.
E. NORWALK CT

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

VP MOORFOOT, M.
555 LORDSHIP BLVD.
STRATFORD CT

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

C WICK, MYRON
55 LORDSHIP BLVD.
STRATFORD CT

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TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE NAME 2. NAME 3. STREET ADDRESS 4. CITY-STATE-ZIP

PD MARSON, ARNALDO M

☒ Change ☐ Addition

5. CITY-STATE-ZIP 6. CITY-STATE-ZIP 7. CITY-STATE-ZIP 8. CITY-STATE-ZIP

☐ Change ☐ Addition

9. CITY-STATE-ZIP 10. CITY-STATE-ZIP 11. CITY-STATE-ZIP 12. CITY-STATE-ZIP

☐ Change ☐ Addition

13. CITY-STATE-ZIP 14. CITY-STATE-ZIP 15. CITY-STATE-ZIP 16. CITY-STATE-ZIP

☒ Change ☐ Addition

17. CITY-STATE-ZIP 18. CITY-STATE-ZIP 19. CITY-STATE-ZIP 20. CITY-STATE-ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M.V. MOORFOOT, CFO

1.17.96

203.386.1365

CR2E034 (12/95)