

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90075 012 ***150.00

DOCUMENT # F94000000376

1. Corporation Name
METRIX GROUP, INC.



Principal Place of Business
661 HADLEY ROAD
SOUTH PLAINFIELD NJ 07080

Mailing Address
150 WIRELESS BLVD
HAUPPAUGE NY 11788
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/25/1994

4. FEI Number
22-1900076

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 150 Wireless Blvd

26 P.O. Box 18036

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Hauppauge, NY

28 Hauppauge, NY

Zip Country

Zip Country

24 11788 25 USA

29 11788-8836 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED CORPORATE SERVICES INC
801 NORTHEAST 167 ST STE 300
N MIAMI BCH FL 33162

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C
NAME HANDREKE, PATRICK W
STREET ADDRESS 150 WIRELESS BLVD
CITY-ST-ZIP HAUPPAUGE FL 11788 ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE P
NAME PACE, MICHAEL
STREET ADDRESS 150 WIRELESS BLVD
CITY-ST-ZIP HAUPPAUGE NY 11788 ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME HANDREKE, HANS-JOACHIM
STREET ADDRESS 20402 HAMBURG
CITY-ST-ZIP GERMANY 07080 ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BURNS, RICHARD D
STREET ADDRESS 220 E 42ND ST STE 3000
CITY-ST-ZIP SOUTH PLAINFIELD NJ 07080 ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE CFO
NAME HEINEN, EDWIN F
STREET ADDRESS 150 WIRELESS BLVD
CITY-ST-ZIP HAUPPAUGE NY 11788 ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME ROTHENBURG, HOWARD
STREET ADDRESS 150 WIRELESS RD
CITY-ST-ZIP HAUPPAUGE NY 11788 ☐ DELETE

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Rothenberg

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/17/91

516434-1441 219

CR2E034 (11/98)