2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000329

Entity Name: GINTEL ASSET MANAGEMENT, INC.

FILED Mar 29, 2004 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|--|--|----------------------------------|-----------|---|---------------|--|
| 6 GREENWICH OFFICE PARK GREENWICH, CT 06831 | | | | 191 POST ROAD WEST WESTPORT, CT 06880 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 6 GREENWICH OFFICE PARK GREENWICH, CT 06831 | | | | 500B MONROE TPKE MONROE, CT 06468 | | |
| FEI Number: | : 06-0871969 | FEI Number Applied For() | FEI Nun | nber Not Appl | licable () | Certificate of Status Desired () |
| Name and | Address of C | urrent Registered Agent: | | Name and | Address of | f New Registered Agent: |
| 1201 HAYS TALLAHAS The above in the State | SSEE, FL 3230 named entity se of Florida. |)1 US | ourpose o | f changing i | ts registered | d office or registered agent, or both, |
| SIGNATUR | | is Oissants as FDs sistems I Ass | 1 | | | Dete |
| Election Car | | ic Signature of Registered Age | eni | | | Date |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | CFOS () GERSTEIN, EL 111 FOXBORO NORWALK, CT | DRIVE | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | DV () GINSBERG, DE 315 CAMPANA CORAL GABLE | AVENUE | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | PTD () STAVRIDES, S 30 CARRIE CIR FAIRFIELD, CT | CLE | | Title: Name: Address: City-St-Zip: | | |
| Title: Name: Address: City-St-Zip: | CEOC () GINTEL, ROBE 5 BAYRIDGE R KEY LARGO, F | D | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () GINTEL, BARBA 5 BAYRIDGE R KEY LARGO, F | OAD | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | VD (X) CARROLL, EDV 102 CROSBY S FAIRFIELD, CT | ST . | | Title: Name: Address: City-St-Zip: | | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN G. STAVRIDES PRES 03/29/2004