FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # F95000000830

1. Corporation Name
BREEER NEIDCE PATRONE ASSOC., INC.

900001840929
-05/28/96--01035--053
***233.75

Principal Place of Business	Mailing Address
101 EAST RIDGE SUITE 103 DANBURY, CT 06810	SAME

2. Principal Place of Business	2a. Mailing Address
21 101 EAST RIDGE	26 SAME
Suite, Apt. #, etc. 22 SUITE 103	Suite, Apt. #, etc. 27
City & State 23 DANBURY, CT	City & State 28
Zip / Country 24 06810 / 25 USA	Zip / Country 29 / 30

3. Date Incorporated or Qualified: 07 JUNE 1971
3a. Date of Last Report: FEB 95
4. FEI Number: 060871669 ☐ 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

9. Name and Address of Current Registered Agent

EXPIRED (CARR SMITH)

10. Name and Address of New Registered Agent

81 Name: MC HARRY ASSOCIATES
82 Street Address (P.O. Box Number is Not Acceptable): 2780 SW DOUGLAS ROAD
83: SUITE 302
84 City: MIAMI **FL** 85 Zip Code: 33133

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: X [signature] THOMAS M. CARLSON AIA MAY 1, 1996
Signature, typed or printed name of registered agent and title, if applicable — (Date: Required when executing) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRESIDENT DAVID MCCARTNEY 91 WALNUT HILL RD. BETHEL, CT 06801	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT DAVID BOOTH 76 TOPSTONE RD. RIDGEFIELD, CT 06877	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SR. PRINCIPAL ENRICO PATRONE 841 RIVERBANK RD. STAMFORD, CT 06903	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	PRINCIPAL STEVEN LA PORTA 201 HANOVER RD. NEWTOWN, CT 06470	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	PRINCIPAL WILLIAM KLINZ 8081 SAGUARO RIDGE RD. PARKER, CO 80134	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	5-1-96 DR	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] DAVID BOOTH 30 APRIL 96 203 792 3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #