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 # **F95000002736 (5)**

1. Corporation Name
ELCOM INTERNATIONAL, INC.

Principal Place of Business
10 OCEANA WAY
NORWOOD MA 02062

Mailing Address
10 OCEANA WAY
NORWOOD MA 02062

3. Date Incorporated or Qualified: **06/07/1995**
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: **04-3175156** — 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
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
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 607.1506, 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 _____ DATE

12. OFFICERS AND DIRECTORS

TITLE	CEOC	☐ DELETE
NAME	CROWELL, ROBERT J	
STREET ADDRESS	10 OCEANA WAY	
CITY-ST-ZIP	NORWOOD MA 02062	
TITLE	V	☐ DELETE
NAME	WOLF, DAVID B	
STREET ADDRESS	10 OCEANA WAY	
CITY-ST-ZIP	NORWOOD MA 02062	
TITLE	CFOT	☐ DELETE
NAME	MULHERN, LAURENCE F	
STREET ADDRESS	10 OCEANA WAY	
CITY-ST-ZIP	NORWOOD MA 02062	
TITLE	V	☒ DELETE
NAME	HALNEN, JOHN E	
STREET ADDRESS	10 OCEANA WAY	
CITY-ST-ZIP	NORWOOD MA 02062	
TITLE	V	☒ DELETE
NAME	MURRAY, WILLIAM T	
STREET ADDRESS	10 OCEANA WAY	
CITY-ST-ZIP	NORWOOD MA 02062	
TITLE	P	☒ DELETE
NAME	KOVALCIK, JOHN R JR	
STREET ADDRESS	111 SINCLAIR STREET	
CITY-ST-ZIP	BRISTOL PA 19007	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '2

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	V	☐ Change ☒ Addition
4.2 NAME	James Rousou	
4.3 STREET ADDRESS	10 Oceana way	
4.4 CITY-ST-ZIP	Norwood MA 02062	
5.1 TITLE	V	☐ Change ☒ Addition
5.2 NAME	Andres Escallon	
5.3 STREET ADDRESS	10 Oceana way	
5.4 CITY-ST-ZIP	Norwood MA 02062	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing, if 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 a 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 with any change or addition in attachment with an address.

SIGNATURE: _____ 4/29/96 (617) 762-0202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)