FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 09.10f2 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State FILED DIVISION OF CORPORATIONS 1997 97 MAY 23 PM 2: 53 DOCUMENT # FOID (10000) SECRETARY OF STATE TALLAHASSEE, FLORIDA Paradigm4, Inc. Principal Place of Business Mailing Address 885 Third Avenue Suite 450 3. Date Incorporated or Qualified 3a. Date of Last Report New York, NY 10022-4834 March 26, 1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 22-3415573 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country Ζιρ 8. This corporation has liability for intangible tax under s. 199.032, Yes X No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Florida Filing and Search Services, Inc. Street Address (P.O. Boshing Market Plan 183--7 842 East Park Avenue 83 Tallahassee, Florida 84 City 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 it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE CEO/P/D Change Addition 1.1 TITLE TITLE John Bay 1.2 NAME NAME 89 Elmwood Road 1.3 STREET ADDRESS STREET ADDRESS Cedar Grove, NJ COC/SV/AS/D 14 CHY-ST-ZIP 07009 DELETE 21 TITLE Change Addition Trille 2.2 NAME Keith Evans 62 Hemlock Drive 2.3 STREET ADDRESS STREET ADOPESS North Tarrytown, NY 10591 2. 4 CITY-ST-ZIP CHY ST ZIP DELETE Change 111: F 31 TITLE CFO/V/D ___ Addition 32 NAME Florin C. Vicol NAME 33 STREET ADDRESS 17 Crest Drive STREET ADDRESS Englishtown, NJ 07726 3.4 CITY-ST-ZIP CHY ST 20 DELETE Спапое . Addition & 1 TOTLE SV/T/D FILLE 4. 2 NAME Joseph Dion 32 Kenton Avenue 4.3 STREET ADDRESS STEELT ALDRESS <u> Marlton, NJ 08053</u> 44 CITY - ST-ZIP CITY ST ZP DELETE 5.1 TOUR ☐ Change Addition sv/s/d TITLE 5.2 NAME NAME Thomas W. Welch 90 Glenwood Mountain Road STREET ADDRESS 5.3 STREET ADDRESS 5 4 CITY - ST - ZIP Sussex. NJ 07461 CITY ST 70 DELETE 6.1 TITLE __ Change ■ Addition III.E 6.2 NAME NAME 63 STREET ADDRESS STREEL ADDRESS 6.4 CITY-ST-ZIP

14. If do 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.

SIGNATURE:/

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR F18rin C. Vicol

5/20/9 7-212-303-6803 Dayling Phone #



ACCOUNT NO. : 072100000032

REFERENCE

: 353761

AUTHORIZATION

COST LIMIT : \$ 558.75

ORDER DATE: May 5, 1997

ORDER TIME :

9:43 AM

ORDER NO. : 353761-030

CUSTOMER NO:

4312752

CUSTOMER: Peggy A. Olko, Legal Asst

Shipman & Goodwin Llp

1 American Row

Hartford, CT 06103

ANNUAL REPORT FILING

NAME:

PARADIGM4, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen Rozar

EXAMINER'S INITIALS: