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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

F96000003019 (4) DOCUMENT #

INJECTRONICS, INC.

FILED Mar 05 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address													
ONE UNION			ONE UNION STREET										
CLINTON MA 01510			CLINTON MA 01510						DO NOT WRITE IN TH	IC CDACE			
								-		IS SI AUL			
									 Date Incorporated or Qualified 06/14/1996 				
2. Principal P	lace of Business		2a. Maili	ng Address					4, FEI Number	I	Applied For		
21			26						04-2442602		Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.							\$8.75	Additional		
22			27						5. Certificate of Status Desired	Fee	Required		
City & State	<u>.</u>	City & State						6. Election Campaign Financing	\$5.0	0 May Be			
			28						Trust Fund Contribution		d to Fees		
Zip		Country	Zip Coun			ıntrv			8. This corporation owes or has paid the				
	├ ─┐	Jodnii y	29		30	,			Personal Property Tax due June 30.		No No		
24	25	Address of Current		Agent	[30]		<u></u>		10. Name and Address of New Register				
1/IF		AUGIOSS OF COTTOIN	negistered	Agont		81	Nan		10, manio and reaction of the first				
	NE, H J	M 07F 000] "	11011	,,,,					
	240 CRANDON BLVD, STE 202							82 Street Address (P.O. Box Number is Not Acceptable)					
KE	y bis cayne fl	. 33149				Ш							
						83							
						84	City			. 85 Zi	p Code		
							City		F	:L °° -			
11. Pursuant	to the provisions of	of Sections 607.0502	and 607.15	08, Florida Statu	tes, the a	bove	-nam	ed corpora	ation submits this statement for the purpos	e of changing	its registered		
office or r	registered agent, c	or both, in the State o	f Florida. Su	ich chan ge wa s	authorize	d by	the c	corporation	h's board of directors. I hereby accept the	appointment :	as registered		
agent. La	ım t a mıllar witn, ar	id accept the obligati	ions or, Sec	tion 607.0505, F	iona sia	lutes	٠.						
SIGNATURE				1.2.2. Tale	NTC Panistore	d Acc	ol paga	dua roo irod r	when reinstating) DAT	F			
40	Signature, typed or print	OFFICERS AND			13.	и жде	in signa	nure required s	ADDITIONS/CHANGES TO OFFICERS A		ORS IN 12		
12.	PCDT	OFFICENS AND	DIRECTOR	DELETE	1.1 T	TIE		CEO), Treasurer, Director	A Chang			
TITLE	BARANANO.	CARLOS M							ranano, Carlos M.				
NAME					1.2 N				•				
STREET ADDRESS	378 CARIBBI					1.3 STREET ADDRESS		SS	Same				
CITY-ST-ZIP	KEY BISCAY	NE FL			1.4 C	ITY-S	T-ZIP						
TITLE	V			DELETE	2 1 T	TLE		Pre	esident, Director	XX Chang	e 🔝 Addition		
NAME	NAZZARO, P				2.2 N	AME		Naz	zaro, Paul A.				
STREET ADDRESS	148 SEWELL	. ST			2.3 S	TREET	ADDRES	SS I	Bridle Path				
CITY-ST-ZIP	BOYLSTON I	MA			2 4 (:ITY - <	ST-ZIP	Shr	ewsbury, MA 01545				
TITLE	8			DELETE	3.1 T		, <u>.</u>	Sec	retary Director	Chang	e Addition		
	CULHANE, P	E			3.2 N			Cul	retary Director Lhane, P. E.				
NAME	5 CANTERBL						tubbe.	-1/2.5	itill meadow way				
STREET ADDRESS	FRAMINGHA						ADDRES		mingham, MA 01701		ŀ		
CITY-ST-ZIP	FIVMINGOV	W 17/7		Delete			T-ZIP			Chang	e KX Addition		
TIFLE				DELETE	4.1 T				rector, CFO		P Vanillinis		
NAME					4.21	IAME		Kuh	nn, Richard J. 22 Worcester Rd.				
STREET ADDRESS					4.3 S	TREET	ADDRES				İ		
CITY-ST-ZIP					4.4 C	ITY-\$	T - ZIP	Fra	mingham, MA 01701				
TITLE				DELETE	5.1 T	ITLE		Dir	rector, VP	Chang	e Addition		
NAME					5.2 N	AME			del, Dale A.				
STREET ADDRESS							ADDRES						
•								_ \ \\ \frac{4}{7} \frac{1}{2}	55, Whi Big Beaver		1		
CITY-ST-ZIP				DELETE	6.1 T	ITY-S	1-212	VP		Chang	e K Addition		
TATLE				CT) DECEIE				'-	efield Daniel C	والدارد ليب			
NAME					6.2 N			106	rfield, Daniel G. Tuttle Rd.				
STREET ADDRESS					6.3 _. S	TREET	ADDRES	33					
City-St-ZIP					6.4 C	ITY-S	T-ZIP	Ste	erling, MA				
14 I berehv (certify that the info	rmation supplied with	this bling o	does not qualify	for the ex	emp	tion st	tated in Se	ection 119.07(3)(i), Florida Statutes. I furthe	r certify that t	he information		

Tree-by ceruity man the information supplied with this limit does not quality for the exemption stated in Section 1.19.0 (3)(), Florida Statutes. Truther ceruity that it entrificated 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. P 4 PINAL C. I WA

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