

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90221 011 ***150.00

DOCUMENT # F97000003321

1. Corporation Name

ORIGIN TECHNOLOGY IN BUSINESS, INC.

Principal Place of Business

430 MOUNTAIN AVENUE
MURRAY HILL NJ 07974

Mailing Address

C/O PENAC
100 EAST 42ND STREET, TAX DEPT. 21ST FL
NEW YORK NY 10017
1251 Avenue of the Americas
New York, New York 10020

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

06/25/1997

4. FEI Number

13-3473749

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 owes the current year Intangible
Personal Property Tax.

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 607.1508, 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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME CARPENTER, ROBERT R
STREET ADDRESS 430 MOUNTAIN AVENUE
CITY-ST-ZIP MURRAY HILL NJ 07974

DELETE

TITLE D
NAME HENECK, MARTIN I
STREET ADDRESS 430 MOUNTAIN AVENUE
CITY-ST-ZIP MURRAY HILL NJ 07974

DELETE

TITLE TV
NAME CURHAM, JAMES CFO
STREET ADDRESS 430 MOUNTAIN AVENUE
CITY-ST-ZIP MURRAY HILL NJ 07974

DELETE

TITLE V
NAME HUTCHINSON, JOHN
STREET ADDRESS 430 MOUNTAIN AVENUE
CITY-ST-ZIP MURRAY HILL NJ 07974

DELETE

TITLE AS
NAME FRIEDLANDER, PAUL S
STREET ADDRESS 100 EAST 42ND STREET
CITY-ST-ZIP NEW YORK NY 10017

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME Steve Truitt
1.3 STREET ADDRESS 6606 LBJ Freeway, Suite 200
1.4 CITY-ST-ZIP Dallas, TX 75240-6533

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE V
4.2 NAME Martin I. Heneck
4.3 STREET ADDRESS 430 Mountain Avenue
4.4 CITY-ST-ZIP Murray Hill, NJ 07974

Change Addition

5.1 TITLE AS
5.2 NAME Paul S. Friedlander
5.3 STREET ADDRESS 1251 Avenue of the Americas
5.4 CITY-ST-ZIP New York, New York 10020

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/99

212-536-0750

Date

Daytime Phone #

CR2E034 (1/198)

0564508