

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
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1996 AUG 29 PM 1:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # J89959
1. Corporation Name
INTERNATIONAL DATA MATRIX, INC.

Principal Place of Business: **9 Townsend West**
Mailing Address: **9 Townsend West**

2. Principal Place of Business: **9 Townsend West**
2a. Mailing Address: **9 Townsend West**
21. Suite Apt #, etc:
22. Suite Apt #, etc:
23. City & State: **Nashua, New Hampshire**
24. Zip: **03063** Country: **USA**
25. Zip: **03063** Country: **USA**
26. City & State: **Nashua, New Hampshire**
27. City & State: **Nashua, New Hampshire**
28. Zip: **03063** Country: **USA**
29. Zip: **03063** Country: **USA**
30. Zip: **03063** Country: **USA**

3. Date Incorporated or Qualified: **August 3], 1987**
3a. Date of Last Report: **April 18, 1995**
4. FEI Number: **59-2840594**
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. 190.032 Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**Stephen M. Wagman
28100 U.S. 19 North
Suite 200
Clearwater, Florida 34621**

10. Name and Address of New Registered Agent
81. Name: **United Corporate Services, Inc.**
82. Street Address (P.O. Box Number is Not Acceptable): **801 Northeast 167th Street**
83. Suite: **Suite 300**
84. City: **North Miami Beach** FL 85. Zip Code: **33162**

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: **RAY A. BAAR, PRESIDENT** DATE: **8/28/96**

12. OFFICERS AND DIRECTORS

TITLE	President & Director	<input type="checkbox"/> DELETE
NAME	Dennis G. Priddy	
STREET ADDRESS	9 Townsend West	
CITY-ST-ZIP	Nashua, New Hampshire	
TITLE	Director	<input checked="" type="checkbox"/> DELETE
NAME	Robert A. Goodman	
STREET ADDRESS	100 Erieview Plaza	
CITY-ST-ZIP	Cleveland, Ohio	
TITLE	Vice Pres., Sec. & Treas.	<input checked="" type="checkbox"/> DELETE
NAME	Stephen M. Wagman	
STREET ADDRESS	546 Lucerne Avenue	
CITY-ST-ZIP	Tampa, Florida	
TITLE	Director	<input checked="" type="checkbox"/> DELETE
NAME	Robert A. Eberle	
STREET ADDRESS	S. 801 Stevens	
CITY-ST-ZIP	Spokane, Washington	
TITLE	Director	<input checked="" type="checkbox"/> DELETE
NAME	Harvard H.J. Hill	
STREET ADDRESS	401 Louisiana - 8th Floor	
CITY-ST-ZIP	Houston, Texas	
TITLE	Director	<input checked="" type="checkbox"/> DELETE
NAME	Charles C. Johnson	
STREET ADDRESS	96 Walden Pond Rd.	
CITY-ST-ZIP	Nashua, New Hampshire	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	Dennis G. Priddy	
13. STREET ADDRESS	9 Townsend West	
14. CITY-ST-ZIP	Nashua, New Hampshire	
21. TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22. NAME	Pat V. Costa	
23. STREET ADDRESS	9 Townsend West	
24. CITY-ST-ZIP	Nashua, New Hampshire	
31. TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32. NAME	Luis Figarella	
33. STREET ADDRESS	9 Townsend West	
34. CITY-ST-ZIP	Nashua, New Hampshire	
41. TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42. NAME	Brian St. Pierre	
43. STREET ADDRESS	9 Townsend West	
44. CITY-ST-ZIP	Nashua, New Hampshire	
51. TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52. NAME	William Baker	
53. STREET ADDRESS	9 Townsend West	
54. CITY-ST-ZIP	Nashua, New Hampshire	
61. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME		
63. STREET ADDRESS		
64. CITY-ST-ZIP		

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 supplement, if 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: **Luis Figarella**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/96 (603) 577-8300

CR2E034 (12/95)