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

SIGNATURE AND TYPED OR PRINTED NAME OF CONING OFFICE OR DIRECTOR

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

SIGNATURE:

OCUN - Corporation	MENT # P074	72	(4)						
GENE	RAL DATACOMM, INC.					1 (8 8) (8 8) (4) 9 4 (4) (8 8) (8 (8) (8) (8)	<b>16:8</b> (18: 818:1 <b>6</b> :	Dii didir bid	if <b>2:</b> 01: <b>0:0</b> : <b>100</b>
rincipal Place	of Business	Mailing A	ddraec						
ROUTE 63		•							
	Y CT 06762-1299	ROUTE Middli	EBURY CT 0676	52-1 <b>29</b> 9					
District Di						3. Date Incorporated or Qualified 09/19/1985		of Last F <b>5/01/1</b> 9	
Principal Pla	ace of Business	2a. Mailing	g Address			4. FEI Number		<b></b>	Applied For
Suite, Apt. #	#. etc.	26 Suite	Apt. #, etc.	··		06-1117085			Not Applicable
	.,	27	7421. 11, 010.			5. Certificate of Status Desired			5 Additional Required
City & State	)	City &	State			6. Election Campaign Financing		·	May Be
		28		727		Trust Fund Contribution			d to Fees
Zip	Country	Zip		Country	/	8. This corporation has liability for			
	9. Name and Address of Curr	29 ent Registered 4	\nent	30			s □No		
		The state of the s		81	Name	10. Name and Address of New	megistered .	Agent	······································
THE PR	ENTICE-HALL CORPORATION	SYSTEM INC			1				
	AYS STREET	CICILIN 1110.		82	Street Addi	ress (P.O. Box Number is Not Accepta	able)		
SUITE 1				83	<del> </del>				
	IASSEE FL 32301								
				84	City		FI	11	p Code
Pursuant to or registere familiar with	o the provisions of Sections 607.05 ed agent, or both, in the State of Fic ib. and accept the obligations of Sc	02 and 607.1508, prida. Such chang potion 607.0505. E	Florida Statute e was authorize	es, the above od by the com	L named corpor ocration's boar	ration submits this statement for the p rd of directors. I hereby accept the ap	urpose of cha pointment as	inging its i registered	registered offi I agent. I am
NATURE _	Signature, typed or printed name of registered ag	enciano teles fapilicable	ionoa statutes.	lt : Registered Age		d when reinstating)	DATE		
NATURE	Signature, typed or printed name of registered ag	incanc to difapplicable	(NO	TE Registered Age			DATE FICERS AND	DIRECTO	DRS IN 12
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