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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P12098

(0)

1. Corporation Name
CONSPEC SYSTEMS INC.

Principal Place of Business
55 WINANS AVENUE
CRANFORD NJ 07016

Mailing Address
55 WINANS AVENUE
CRANFORD NJ 07016-3144



2. Principal Place of Business

21 3 Werner Way
Suite, Apt. #, etc.

22 City & State
Lebanon NJ

23 Zip Country
08833 Hunterdon

2a. Mailing Address

26 Same
Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
11/12/1986

3a. Date of Last Report
05/01/1996

4. FEI Number
22-2419350

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. 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 PD ☐ DELETE
NAME DADD, RONALD F.
STREET ADDRESS 55 WINANS AVENUE
CITY-ST-ZIP CRANFORD NJ

TITLE STD ☐ DELETE
NAME ALTIERI, EDWARD J
STREET ADDRESS 55 WINANS AVENUE
CITY-ST-ZIP CRANFORD NJ

TITLE VD ☐ DELETE
NAME STEWART, R GORDON
STREET ADDRESS 55 WINANS AVENUE
CITY-ST-ZIP CRANFORD NJ

TITLE AST ☐ DELETE
NAME ERWIN, DOROTHY M.
STREET ADDRESS 55 WINANS AVENUE
CITY-ST-ZIP CRANFORD NJ

TITLE AS ☐ DELETE
NAME OLSEN, PAMELA
STREET ADDRESS 55 WINANS AVENUE
CITY-ST-ZIP CRANFORD NJ

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 3 Werner Way
1.4 CITY-ST-ZIP Lebanon NJ 08833

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 3 Werner Way
2.4 CITY-ST-ZIP Lebanon NJ 08833

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 3 Werner Way
3.4 CITY-ST-ZIP Lebanon NJ 08833

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS 3 Werner Way
4.4 CITY-ST-ZIP Lebanon NJ 08833

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS 3 Werner Way
5.4 CITY-ST-ZIP Lebanon NJ 08833

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.03(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

4/8/97

(908) 236-0800

CR2E034 (9/96)