

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90096 030 ***150.00

DOCUMENT # P23372

1. Entity Name
XYPLEX, INC.

Principal Place of Business
295 FOSTER STREET
LITTLETON MA 01460-2016

Mailing Address
295 FOSTER STREET
LITTLETON MA 01460-2016

80051421



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

04-2737835

1. Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
 NAME **LOTAN, NOAM**
 STREET ADDRESS **8943 FULBRIGHT AVENUE**
 CITY-ST-ZIP **CHATSORTH CA 91311**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **MARGALIT, SHLOMO**
 STREET ADDRESS **8943 FULBRIGHT AVENUE**
 CITY-ST-ZIP **CHATSORTH CA 91311**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **-VP** ☒ Delete
 NAME **GLAZER, EDMUND**
 STREET ADDRESS **295 FOSTER ST**
 CITY-ST-ZIP **LITTLETON MA 01460**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Meredith DeGregorio
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Meredith DeGregorio

978.952.

Courtney

5343

Date

Daytime Phone #

CR2E034 (9/01)

ATTACH DOC # P23372 60061921



iTouch
Communications

295 Foster Street
Littleton, MA 01460
Tele: (978) 952-5300

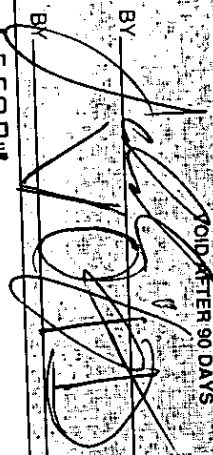


CHECK NO. 229665

PAY EXACTLY *ONE HUNDRED FIFTY* and *00/100* DOLLARS

CHECK DATE	CONTROL NUMBER	CHECK AMOUNT
01/15/02	229665	**150.00

TO THE
ORDER OF
Florida Department of Revenue
ACCT #16-03-203106-63

BY 
VOID AFTER 90 DAYS

VEN 301814
⑈229665⑈ ⑆011000138⑆ 00898 45509⑈