

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 06, 1999 8:00 am
Secretary of State

04-06-1999 90052 032 ***150.00

DOCUMENT # P26642

1. Corporation Name

STREAM INTERNATIONAL SERVICES CORP.



Principal Place of Business

275 DAN ROAD
CANTON MA 02021
US

Mailing Address

275 DAN ROAD
CANTON MA 02021
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/24/1989

4. FEI Number

04-2776573

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CEO/D ☐ DELETE
NAME MOORE, STEPHEN
STREET ADDRESS 275 DAN ROAD
CITY-ST-ZIP CANTON MA 02021

1.1 TITLE Director, CEO, and President ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE COPD ☒ DELETE
NAME SALERNO, JUDITH G
STREET ADDRESS 275 DAN RD
CITY-ST-ZIP CANTON MA 02021

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

TITLE D ☒ DELETE
NAME NUNNELLY, MARK
STREET ADDRESS BAIN CAPITAL INC, TWO COPLEY PLACE
CITY-ST-ZIP BOSTON MA

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

TITLE CFOV ☐ DELETE
NAME GLIDDEN, JEFFREY D
STREET ADDRESS 275 DAN ROAD
CITY-ST-ZIP CANTON MA 02021

4.1 TITLE Director, CFO, Vice President and ☒ Change ☐ Addition
4.2 NAME Asst. Treasurer
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE T ☒ DELETE
NAME AVALONE, LYNDA M
STREET ADDRESS 275 DAN ROAD
CITY-ST-ZIP CANTON MA 02021

5.1 TITLE Treasurer ☐ Change ☒ Addition
5.2 NAME John T. Loughran
5.3 STREET ADDRESS 275 Dan Road
5.4 CITY-ST-ZIP Canton MA 02021

TITLE SD ☐ DELETE
NAME BROPHEY, ALICIA T
STREET ADDRESS 275 DAN ROAD
CITY-ST-ZIP CANTON MA 02021

6.1 TITLE Asst. Secretary ☐ Change ☒ Addition
6.2 NAME Eric A. Blumsock
6.3 STREET ADDRESS 275 Dan Road
6.4 CITY-ST-ZIP Canton MA 02021

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:

Alicia T. Brophy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Alicia T. Brophy, Secretary

3/30/99

Date

781-830-2350

Daytime Phone #

CR2E034 (1/1/98)