PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P35598

1. Corporation Name TIMEPLEX, INC.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90020 044 ***150.00



Principal Place of Business Mailing Address						
400 CHESTNUT RIDGE ROAD 400 CHESTNUT RIDGE ROAD						
P O BOX 1206	47 S 4 ,	P O BOX 1206			DO NOT WRITE IN THIS SPACE	
WOODCLIFF LA	KE NJ 0/6/5	WOODCLIFF LAKE NJ 07675 US			3. Date Incorporated or Qualifed	٦
US	•				09/20/1991	
0.00	and of Dunings	2a. Mailing Address			4. FEI Number Applied For	7
	ace of Business	⊢			52-1740275 Not Applicable	-
[21]		Suite, Apt. #, etc.			\$8.75 Additional	┨
Suite, Apt. #, etc.					5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing S5.00 May 8e	٠ ا
		28			Trust Fund Contribution Added to Fees	
Zip Country		Zip Country			This corporation owes the current year Intangible	
		29 (30)			Personal Property Tax.	
24	25 29 30 9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	7	
_	a. name and Address of Carrent	rogistores rigorit	81	Name	:	
THE	PRENTICE-HALL CORPORATION	SYSTEM INC.				4
1201 HAYS STREET		•	82 Street Add		ress (P.O. Box Number is Not Acceptable)	-
SUITE 105		gradus de la companya del companya del companya de la companya de	83			7
	AHASSEE FL 32301	y - 4** * * * * * * * * * * * * * * * * *	53			
'766	AND MODEL I E OFOR I		84	City	FL 85 Zip Code	
44 5	to the provisions of Sections 607 0502	and 607 1509 Florida Statutes ti	he above	a-named com	poration submits this statement for the purpose of changing its registered	-
office or t	enistered agent, or both, in the State of	f Florida. Such change was author	rizea dv.	the corporation	ion's board of directors. I hereby accept the appointment as registered	
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes	•		
SIGNATURE		(NOTE DAY)			ed when reinstating) DATE	1 -
-	Signature, typed or printed name of registered agent OFFICERS AND		13.	it signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_ (§
12.	D OFFICERS AND		1.1 TITLE		Change Additio	n =
TITLE			1.2 NAME			
NAME	SCHLAPBACH, JACOB					200
STREET ADDRESS	BELPSTRASSE 37	B Comment	1.3 STREET ADDRESS			5
CITY-ST-ZIP	CH-3000, SWITZERLAND		1.4 CITY-ST-ZIP 2.1 TITLE		· Change Additio	<u>ਜ਼</u> ੀ ਹੈ
TITLE	P					
NAME	LABRY, JACQUES DE	1	2.2 NAME			
STREET ADDRESS	400 CHESTNUT RIDGE ROAD		2.3 STREET ADDRESS			
CITY-ST-ZIP	WOODCLIFF LAKE NJ 07675		2.4 CITY-S	IT-ZIP	☐ Change ☐ Additio	
πτε	Ι Τ	_	3.1 TITLE		☐ Change ☐ Additio	"
NAME	HUTSON, EDWARD J		3.2 NAME			
STREET ADDRESS	400 CCHESTNUT RIDGE ROAD		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	WOODCLIFF LAKE NJ 07675		3.4. CITY- S	ST-ZIP		4
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change ☐ Additio	١
NAME	HUTSON, EDWARD J		4. 2 NAME			
STREET ADDRESS	400 CHESTNUT RIDGE ROAD	l	4.3 STREET ADDRESS			
CITY-ST-ZIP	WOODCLIFF LAKE NJ 07675		4.4 CITY-S	T-ZIP		_
TITLE		☐ DELETE	5.1 TITLE		Change Addition	n
NAME		1	5.2 NAME			
		1	5.3 STREE	TADORESS		
STREET ADDRESS		L L	5.4 CITY-S	į		-
TITLE			6.1 TITLE		☐ Change ☐ Additio	n
	·	-	6.2 NAME			
NAME				T ADDRESS		1
STREET ADDRESS			6.4 CITY-S			
CITY-ST-ZIP			0.4 CHT-5	1-217		

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 occiver 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: