

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000012226 (6)

1. Corporation Name

NMC LATIN AMERICA, INC.



Principal Place of Business

1601 TRAPELO RD
WALTHAM MA 02154
US

Mailing Address

1601 TRAPELO RD
WALTHAM MA 02154
US

3. Date Incorporated or Qualified
12/15/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
65-0378788

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

C T CORPORATION SYSTEM
1200 SOUTH 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	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	SPEARS, PETER F	11 HEARTHSTONE PLACE	ANDOVER MA	<input checked="" type="checkbox"/>
VD	LOWRIE, EDMUND G	21 EDMONDS RD	CONCORD MA	<input checked="" type="checkbox"/>
T	NOGEOLO, A M	19 WASHINGTON DR	SUDBURY MA	<input type="checkbox"/>
S	WHITING, JOHN K	36 UNION ST	NORFOLD MA	<input type="checkbox"/>
AS	BOWEN, CAROL E	187 GROVE ST	LEXINGTON MA	<input type="checkbox"/>
AS	KEMBEL, DAVID A	151 REED FARM RD	BOXBOROUGH MA	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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***5800.00

SEE ATTACHED

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424

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

ASS'T TREASURER

4-1-96 617-446-9850

CR2E034 (12/95)

NMC Latin America, Inc.
LIST OF DIRECTORS AND OFFICERS

EFFECTIVE 04/12/1996

DIRECTORS	OFFICE HELD	SS NUMBER	HOME ADDRESS
CONSTANTINE HAMPERS, M.D.	DIRECTOR	190-24-4386	EAST LAKE ROAD BOX 494, OAKHILL DUBLIN, NH 03444
CHRISTOPHER T. FORD	DIRECTOR	015-40-4292	4 DURHAM DRIVE LYNNFIELD, MA 01940-1238
SYED KAMAL	DIRECTOR	436-35-9080	4 LISA LANE ACTON, MA 01720 BOSTON, MA 02199
.....			
OFFICERS	OFFICE HELD	SS NUMBER	HOME ADDRESS
ARMANDO JACOMINO	PRESIDENT	267-11-1846	1295SW57 TERRA MIAMI, FL 33183
CHRISTOPHER T. FORD	VICE PRESIDENT	015-40-4292	4 DURHAM DRIVE LYNNFIELD, MA 01940-1238
SYED KAMAL	VICE PRESIDENT	436-35-9080	4 LISA LANE ACTON, MA 01720
A. MILES NOGEOLO	TREASURER	012-34-5855	19 WASHINGTON DRIVE SUDBURY, MA 01776
MARC S. LIEBERMAN	ASSISTANT TREASURER	108-38-6181	10 CROWN POINT ROAD SUDBURY, MA 01776
JAMES V. LUTHER	ASSISTANT TREASURER	010-34-9716	50 SUNNYSIDE AVENUE READING, MA 01867
CAROL E. BOWEN	ASSISTANT SECRETARY	139-44-5206	187 GROVE STREET LEXINGTON, MA 02173
JOHN K. WHITING IV	SECRETARY	295-44-1279	36 UNION STREET NORFOLK, MA 02056

BUSINESS ADDRESS FOR OFFICERS/DIRECTORS
RESERVOIR PLACE
1601 TRAPELO ROAD
WALTHAM, MA 02154
(617)466-9850