-PILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300004184 (6)

WESTON GROUP, INC.

Principal Place of Business		Ma	Mailing Address				T LONGISCHE 11E INTON 30214 MAIN AND 11			
C/O ENCORE COMPLITER CORP.			C/O ENCORE COMPUTER CORP.							
	SUNRISE BLVD		DI WEST SUNRISE BLY							
FT. LAUDERL US	DALE FL 33313	FI. US	. Lauderdale FL 3331 :	13-4406			3. Date Incorporated or Qualified	9- 0	ate of Last F)anart
03							01/20/1993		/16/1996	вероп
2. Principal	Place of Business	2a.	Mailing Address				4. FEI Number		A	oplied For
21		26					65-0393071			ot Applicable
Suite, Ap	t #, etc		Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
-		27								equired
	ine	ļ	City & State				6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution			to Fees
Zip	Country	<u> </u>	Zip	\vdash	untry		8. This corporation has liability for			. 199.032,
24	[25]	29		30	1			Yes		
=10	9. Name and Address of Curre	ent Hegis	tered Agent		81	Name	10. Name and Address of New R	Aistalac	Agent	
	SHER, KENNETH G				"	Maille				
C/O ENCORE COMPUTER CORP.			82 Street Ac			Street Add	dress (P.O. Box Number is Not Acceptable)			
	01 WEST SUNRISE BLVD.									
FT.	. LAUDERDALE FL 33313				83	1				
					84	City			85 Zip	Code
								<u>Fl</u>	<u> </u>	
11. Pursuar	nt to the provisions of Sections 607.05	502 and 61 te of Floric	07.1508. Florida Statu da. Such change was	tes, the a	above ad by	named corp	poration submits this statement for the tion's board of directors. I hereby acce	purpose (of changing i pointment as	ts registered registered
	am familiar with, and accept the obli						nors sours of suppliciply 1 visitory 2000	рт ило ар	portune do	
SIGNATURE										
	Signature typed or pea leasuarms of registered a					nt signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE	D DIDECTO	DC (N. 1.0
12.	OFFICERS A	ND DIREC	DELETE	13.			ADDITIONS/CHANGES TO UFFI	DEHS AN	Change	Addition
TITLE	FISHER, KENNETH G		☐ bereie		TITLE				☐ Citalihe	THE MOUNTED
NAME.	OF INDIAN OPERA ICLANO				MAME					
STREET ADDRESS	MIAMI BEACH FL			1		address				
CHTY-ST-ZiF	STD		DELETE		CHTY-S	T-ZIP		<u></u>	Change	Addiso
TiTLE			T DEFEIF		TITLE				Change	Addition
NAME	FISHER, BARBARA Z				NAME					
STREET ADDRESS				2.3	STREET	ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL				CITY - S	ST-ZIP		· 		
TITLE	D DONEY ICEE		☐ DELETE		TITLE				Change	Addition Addition
NAME	RONEY, JEFF				NAME					
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP	SHERBORN MA 01770			_	CITY-	ST-ZIP				7 (198
TITLE	DONEY KADEN E		DELETE		TITLE				Change	Addition
NAME	RONEY, KAREN F				NAME					
STREET ADDRESS	27 BRIDLE PATH			4.3	STREET	ADDRESS				
C:TY - ST - ZIP	SHERBORN MA 01770	-			CITY-S	T-ZIP			T 1 6:	
TITLE			☐ DELETE	5.1	TITLE				Change	Addition
NAMÉ				5.2	NAME					
STREET ADDRESS	5			5.3	STREET	ADDRESS				
CITY - S1 - ZIP	<u> </u>			5.4	CITY - S	T-ZIP				
TOLE			DELETE	6.1	TITLE				☐ Change	Addition
NAME				6.2	NAME					
STREET ADDRESS	s			6.3	STREET	ADDRESS				
CITY-ST-ZIP				64	CITY-S	i-ZIP				

14. I do 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in B'ock 12 or Block 13 if changed, or on an attachment of the address.