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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P18904 (3)

1. Corporation Name  
BARROW INDUSTRIES INC.



Principal Place of Business: 5 DAN ROAD CANTON MA 02021  
Mailing Address: 3 EDGEWATER DRIVE HOWARD MA 02062-4842 US

3. Date Incorporated or Qualified: 04/20/1988  
3a. Date of Last Report: 02/27/1996  
4. FEI Number: 04-2225826  
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

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
GONZALEZ NYDIA  
8700 NW 27TH ST, #104  
MIAMI FL 33122

10. Name and Address of New Registered Agent  
81 Name: Gonzalez Nydia  
82 Street Address: 8260 NW 27th Street Suite 409  
83  
84 City: Miami FL 85 Zip Code: 33122

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] DATE: [ ]

12. OFFICERS AND DIRECTORS  
1. PD BARROW, STEPHEN Y. 783 NEWTON STREET BROOKLINE MA  
2. SD ARNOLD, ROBERT E. 48 WHITEWALL ST. QUINCY MA  
3. T HARPER, DANIEL 164 CLAYBROOK RD. DOVER MA  
4. D HUNTER, DONALD 183 CARROLL AVE. BROCKTON MA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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 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] DATE: 1/18/97 DAYTIME PHONE: 617 440 2666

CR2E034 (9/96)