

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P38743

1. Corporation Name

Eastrich No.90 Corporation

Principal Place of Business

Mailing Address

c/o Aldrich Eastman Waltch
225 Franklin Street
Boston, MA 02110

Same

3. Date Incorporated or Qualified
5/11/92

3a. Date of Last Report
4/30/95

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

4. FEI Number
04-3148139

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

10. Name and Address of New Registered Agent

The Prentice Hall Corporation System, Inc.
1201 Hays Street, Suite #105
Tallahassee, FL 32301

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 person filing report and date of filing

Signature, typed or printed name of new registered agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	President /Director	<input checked="" type="checkbox"/> DELETE
NAME	Charles F. Wu	
STREET ADDRESS	58 Plainfield Street	
CITY-ST-ZIP	Waban, MA 02168	
TITLE	Vice-President/Director	<input type="checkbox"/> DELETE
NAME	Thomas K. Albert	
STREET ADDRESS	176 Ocean Street	
CITY-ST-ZIP	Lynn, MA 01902	
TITLE	Vice-President/Director	<input type="checkbox"/> DELETE
NAME	J. Grant Monahan	
STREET ADDRESS	68 Snake Hill Road	
CITY-ST-ZIP	Belmont, MA 02178	
TITLE	Treasurer	<input type="checkbox"/> DELETE
NAME	Gerd A. Cross	
STREET ADDRESS	47 Robinson Creek Road	
CITY-ST-ZIP	Pembroke, MA 02359	
TITLE	Clerk	<input type="checkbox"/> DELETE
NAME	J. Grant Monahan	
STREET ADDRESS	68 Snake Hill Road	
CITY-ST-ZIP	Belmont, MA 02178	
TITLE	Assistant Clerk	<input type="checkbox"/> DELETE
NAME	Arleen M. Bernardi	
STREET ADDRESS	22 Westvale Road	
CITY-ST-ZIP	Milton, MA 02186	

1. TITLE	President/Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	Mark A. Albertson	
13. STREET ADDRESS	267 King Caesar Road	
14. CITY-ST-ZIP	Duxbury, MA 02332	
2. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME		
23. STREET ADDRESS		
24. CITY-ST-ZIP		
3. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME		
33. STREET ADDRESS		
34. CITY-ST-ZIP		
4. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME		
43. STREET ADDRESS		
44. CITY-ST-ZIP		
5. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME		
53. STREET ADDRESS		
54. CITY-ST-ZIP		
6. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME		
63. STREET ADDRESS		
64. CITY-ST-ZIP		

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***200.00

5/30/96
617261-9000

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arleen M. Bernardi

4/30/96

617261-9000

CR2E034 (12/95)