

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222,3040

Matthew A. Brown, Secretary of State

2005 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) L. Corporate ID No. 2 Name of Corporation 118990 METRITEL, Inc. ^{3. Sinvi Add}T649^{ijs}S世の哲学^がL'ane Connorth Kingstowh State RI ^{Zip} 02852 4. Business P2950-1120 5. State of Incorporation 6. SIC Code 1115 **RHODE ISLAND** 7. Brief Description of the Character of Business Conducted in Rhode Island
PROVIDE WIRELESS TELEMETRY EQUIPMENT AND SERVICES 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Nagy. Mark W. Bowen Vice Resident Name Sinvi Addris 1649 Stony Lane Street Address ^{Cu}North Kingstown^{Stat}RI D2852 ^{senung Nu}Mark W. Bowen mankaik"W. Bowen Sires Address 1649 Stony Lane Sum 1849 Stony Lane ^{Cu}North Kingstown ^{Stat}RI 02852 B2852 Canorth Kingstow frace RI 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Director Nam<mark>Mark W. Bowen</mark> PHOM DING Since Address 1649 Stony Lane Street Address CitNorth Kingstown State RI State Zφ. 02852 Director Nam None Direct Norm Sincel Address Street Address City State City Zip State ZIP. 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Series Number of Shares Class/Series No Par 1000 Common 8,000 NO PAR VALUE This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date 2-7-05

Check No. 22

By: 45

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and a	
including and accompanying schedules :	and statements, and that all statement
contained hereig are true and correct.	January <i>20</i> 2005
Signature of Officer	Date
Mark W. Bow	en
Print or Type Name of Officer	
tresident	
Title of Officer	Form 630 Rev. 12/03



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State .

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 200	ROFIT	CORPORATION	ANNUAL	REPORT FOR TH	HE YEAR	2004
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Filing Period: January 1 - March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No 2 Name of Corporation 118990 METRITEL, Inc. Cin North Kingstown State RI 02852 4. Business Phone No. 295 - 1120 5. State of incorporation 6. SIC Code RHODE ISLAND 1115 7. Brief Description of the Character of Business Conducted in Rhode Island PROVIDE WIRELESS TELEMETRY EQUIPMENT AND SERVICES 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS President Name Mark W. Bowen Vice President Name None Since Address 1649 Stony Lane Street Address Zip North Kingstöwn 02852 . Mark W. Bowen Bowen Street Address 1649 Stony Lane Stony Lane City North Kingstown North Kingstown State 02852 RI 02852 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name
Mark W. Bowen Director Name None Street Address Street Address 1649 Stony Lane Zip North Kingstown RI 02852 Director Name None Director Name None Street Address Street Address City State Zip City 7.Ip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) **AUTHORIZED SHARES** ISSUED SHARES Number of Shares Class/Series Par Value Par Value Number of Shares Class/Series 1000 Common No Par 8,000 NO PAR VALUE This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under penalty of perjury, I declare and affirm that I have examined this report. including any accompanying sepodules and statements, and that all statements contained Herein are true and extrect. Signature of Officer Mark. w. Bowe
Print or Type Name of Officer FOR SECRETARY OF STATE USE ONLY



Street Address

STATE OF PHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

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PROFIL CORPO Filing Period: January 1:	RATION -March 1 •	ANNUAL Filing Fee: \$50	REPORT	FOR THE	YEAR_	2003
FORM MUST BE TYPED OR PRINTED	IN BLACK)					
I. Corporate ID No.	2. Name of Corporat	ion				

118990 METRITEL, Inc. 3. Street Addit & Pales ip & Wilnesty !! Lane North CKingstown ZIP02852 RI

4. Business May 3 1120 5. State of incorporation 6. SIC Code

7. Brief Descripting the Street tell will be truly of equilibriant and related services

RHODE ISLAND

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Na Mark W. Bowen Nofieldent Name

Secretary Na Mark W. Bowen Mark www. Bowen

Street Address 1649 Stony Lane 1849"Stony Lane

City North Kingstown RI 02852 North Kingstown State RI

Zip 02852

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Mark W. Bowen **NOWE**

Street Addres 1649 Stony Lane

Street Address

North Kingstown RI 02852 State

Zip

Director No None NOTTE Name

Street Address

State ZIP City State Zip

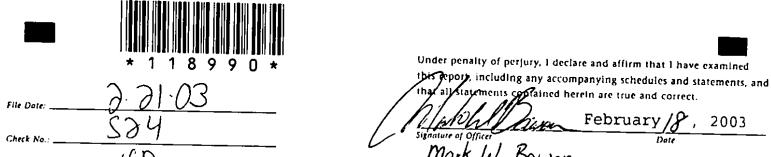
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUFE) STEARES Number of Shares

Class/Series Par Value Number of Shares Class/Series Par Value

8,000 NO PAR VALUE 1000 Common No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

Form 630 12102



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Edward S. Inman, III, Secretary of State 100 North Main Street, Providence, RI 02903-1335

Corporations Division 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1	•	Filing Fee: \$50.00	
FORM MUST BE TYPED IN BLACK)			

1. Corporate ID No.

2. Name of Corporation

118990

METRITEL, Inc.

3. Street Address Principal Rusiness Office

City

ZIp

1649 Stony Lane 4. Business Phone No.

North Kingstown 5. State of incorporation

RI

02852 6. SIC Code

295-1120

RHODE ISLAND

7. Brief Description of the Character of Business Conducted in Rhode Island

Wireless telemetry equipment and related services 8. NAMES AND ADDRESSES OF THE OFFICERS ("x" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Mark W. Bowen None Street Address Street Address 1649 Stony Lane City ZID City Zio North Kingstown RI 02852 Secretary Name Treasurer Name Mark W. Bowen Mark W. Bowen Street Address Street Address 1649 Stony Lane 1649 Stony Lane State Zip State North Kingstown RI 02852 North Kingstown RI 02852 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Mark W. Bowen None Street Address 1649 Stony Lane

Street Address

State

02852

City

State

Zip

North Kingstown

None

Street Address

City

State

Zip

Director Name

None

Street Address

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

8,000 NO PAR VALUE

Number of Shares

Class/Series

Par Value

LSSUTED SHARES Number of Shares

Class/Series

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

Par Value

1000

Common

No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined fluding any accompanying schedules and statements, and ments containly herein are true and correct 2002

Title of Office