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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

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RIVAL ELECTRONICS INCORPORATED

FILED

Apr 22 1998 8:00am

Secretary of State

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2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied Not A	SUITE 802 MIAMI FL 99423→ 33/35			DO NOT WRITE	IN THIS SPACE
2. Making Address 2. Making Address 2. Making Address 2. Making Address 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. Certificate of Status Desired \$8.75 Addit Fee Required City & State \$8. Certificate of Status Desired \$8.75 Addit Fee Required Status Desired Desired Status Desired Desired Status Desired Desired Desired Status Desired		••		3. Date Incorporated or Qualified	
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City & State City & State City	Oute, Apr. #, etc.	<u>├</u> ──¬		Certificate of Status Desired	1 1
Zip Country Zip Country Zip Country 8. Trust Fund Contribution Added to Fe Zip Country 8. This corporation owes or has paid the current year Intanging and the Country 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Name 13. Name 13. Street Address (P.O. Box Number is Not Acceptable) 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 agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes Statutes Significant Expendence of Provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and the Statutes of Florida Statutes of Florid	City & State			6. Election Campaign Financing	
28 29 30 Personal Property Tax due June 30. Yes No. No. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 13. Name 14. VAREZ, PEDRO 19 W FLAGLER ST MIAMI FL 33130 83 84 City FL 85 Zip Code 25		28		, ,	
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ALYAREZ, PEDRO 19 W FLAGLER ST MIAMI FL 33130 82 Street Address (P.O. Box Number is Not Acceptable) 83			30		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature typed or prefet name of registered agent, and the 4 signacable OFFICE RS AND DIRECTORS 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE STATE TORIESS TITLE PS DELETE 1.1 TITLE PS ALVAREZ, PEDRO 1.2 NAME STREET ADDRESS 1.2861 SW 119 ST. 1.3 STREET ADDRESS CITY-ST-2IP MIAMI, FL 00000 1.4 CITY-ST-2IP DELETE 2.1 TITLE DELETE 3.3 TITLE 2.2 NAME 3.3 STREET ADDRESS CITY-ST-2IP DELETE 3.3 TITLE 3.3 TITLE 3.3 TITLE 1.4 CITY-ST-2IP Change CTY-ST-2IP DELETE 3.3 TITLE 3.3 STREET ADDRESS CITY-ST-2IP DELETE 3.3 STREET ADDRESS		ont Registered Agent	81 Name	10, Name and Address of New Heg	istered Agent
## City ## B\$ Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its reg 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 registed agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE Signature typed or profed name of registered agent and title 4 Applicable (NOTE: Registored Agent signature required when reinstaing) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE NAME ALVAREZ, PEDRO 12 NAME SIREET ADDRESS CITY-ST-ZIP TITLE DELETE 13. STREET ADDRESS CITY-ST-ZIP TITLE DELETE 21. TITLE Change Chan					
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14. I 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 eath; that I are					