

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Feb 11 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F93000002691 (4)**

1. Corporation Name  
**NEW AGE ELECTRONICS, INC.**



Principal Place of Business <b>2363 E PACIFICA PLACE                  RANCHO DOMINGUEZ CA 90220                  US</b>	Mailing Address <b>2363 E PACIFICA PLACE                  RANCHO DOMINGUEZ CA 90220                  US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>06/10/1993</b>	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FET Number <b>95-4156140</b>	Applied For Not Applicable
23. Zip	24. Country	28. Zip	29. Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
24. Zip		25. Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
29. Zip		30. Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>GORDON, HOWARD                  201 ALHAMBRA CIRCLE                  CORAL GABLES FL 33134</b>				10. Name and Address of New Registered Agent	
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)	
83.				84. City	
				85. Zip Code <b>FL</b>	

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 \_\_\_\_\_ (NOTL Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<b>CHAIRMAN, CEO</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PERLMAN, LEE</b>	1.2 NAME	<b>LEE PERLMAN</b>
STREET ADDRESS	<b>2363 E PACIFICA PLACE</b>	1.3 STREET ADDRESS	<b>SAMO</b>
CITY-ST-ZIP	<b>RANCHO DOMINGUEZ CA</b>	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<b>PRESIDENT, COO, SUC</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VSD</b>	2.2 NAME	<b>ADAM CARROLL</b>
STREET ADDRESS	<b>2363 E PACIFICA PLACE</b>	2.3 STREET ADDRESS	<b>SAMO</b>
CITY-ST-ZIP	<b>RANCHO DOMINGUEZ CA</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<b>EXECUTIVE V.P., CFO</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	<b>FRANK SCOTTO</b>
STREET ADDRESS		3.3 STREET ADDRESS	<b>2363 E. PACIFICA PLACE</b>
CITY-ST-ZIP		3.4 CITY-ST-ZIP	<b>RANCHO DOMINGUEZ, CA 90220</b>
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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 \_\_\_\_\_ DATE **2/11/98**

CR2E034 (10/97)