

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # L87150

1. Corporation Name
ELECTRONICS-LAS FABRICAS, INC.

Principal Place of Business

2300 CORAL WAY
 #200
 MIAMI FL 33145

Mailing Address

2300 CORAL WAY
 #200
 MIAMI FL 33145

2. Principal Place of Business

21 2300 CORAL WAY
 Suite, Apt. #, etc.

22 SUITE 200
 City & State

23 MIAMI FLORIDA
 Zip Country

24 33145 25 U.S.

2a. Mailing Address

26 2300 CORAL WAY
 Suite, Apt. #, etc.

27 SUITE 200
 City & State

28 MIAMI FLORIDA
 Zip Country

29 33145 30 U.S.

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES, INC.
 2300 CORAL WAY
 #200
 MIAMI FL 33145

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 607.1504, 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. The day a copy of the appointment as registered agent is sent familiar with and accepts the conditions of Section 607.0505, Florida Statutes.

SIGNATURE

[Handwritten Signature]

AMADA CANTERA LOPEZ, PRES.

4-26-99

12. OFFICERS AND DIRECTORS

TITLE	DST	[DELETE]
NAME	GUTMAN, GENA	
STREET ADDRESS	115 NE THIRD AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	DP	[DELETE]
NAME	GUTMAN, SALOMON	
STREET ADDRESS	115 NE THIRD AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE		[DELETE]
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[DELETE]
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[DELETE]
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

7000002862857--9
 -05/05/99--01005--010
 ****150.00 ****150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 appointed 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 to an address with all other like employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SALOMON GUTMAN, PRES

4-26-99

APPROVED AND FILED
 APR 28 1999
 99 APR 30 AM 9:01

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified: 07/03/1990
- 4. F.I.T. Number: 65-0205385
- 5. Certificate of Status (Required): \$8.75 Additional Fee Required
- 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May be Added to Fees
- 8. This corporation covers the current year intangible Personal Property Tax: Yes No
- 10. Name and Address of New Registered Agent

0211168

CR2E034 (1-1998)