

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

CORPORATION
ANNUAL REPORT
1995



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

**APPROVED
AND
FILED**

MAY - 1 11 3:11

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000039592 (8)**

C & P ELECTRONIC, INC.

DO NOT WRITE IN THIS SPACE

| | | | | | | | |
|--|--|--|--|----------------------------------|--|--------------------------------|--|
| 1. Principal Office Address | | 2a. Mailing Address | | 3. Date of Corporation's Quarter | | 3a. Date of Last Report | |
| 9843 S.W. 184 STREET MIAMI FL 33157 | | 9843 S.W. 184 STREET MIAMI FL 33157 | | 05/26/1994 | | | |
| 2. Principal Office City/State | | 2a. Mailing Address | | 4. FEI Number | | Applied For | |
| 21 | | 26 | | 65-0493296 | | Not Applicable | |
| 22 | | 27 | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | |
| 23 | | 28 | | 6. Election Campaign Financing | | \$5.00 May Be Added to Fees | |
| 24 | | 25 | | 29 | | 30 | |
| 24 | | 25 | | 29 | | 30 | |

| | | | | | | | |
|---|--|--|--|---|--|--|--|
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |
| PEREZ, CESAR 24932 S.W. 127 PATH MIAMI FL 33032 | | | | B1 Name | | | |
| | | | | B2 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | B3 | | | |
| | | | | B4 City | | | |
| | | | | FL | | | |
| | | | | B5 Zip Code | | | |

11. Pursuant to the provisions of Sections 601, 602, and 607, 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, Florida Statutes.

SIGNATURE: _____ DATE: _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95 | |
|----------------------------|---|---|---|
| NAME | VD PEREZ, PEDRO 14850 NARANJA LAKE BLVD., # B3H HOMESTEAD FL 33032 | 1. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS | | 2. STREET ADDRESS | |
| CITY, STATE, ZIP | | 3. CITY, STATE, ZIP | |
| NAME | PD PEREZ, CESAR 24932 S.W. 127 PATH MIAMI FL 33032 | 4. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS | | 5. STREET ADDRESS | |
| CITY, STATE, ZIP | | 6. CITY, STATE, ZIP | |
| NAME | | 7. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS | | 8. STREET ADDRESS | |
| CITY, STATE, ZIP | | 9. CITY, STATE, ZIP | |
| NAME | | 10. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS | | 11. STREET ADDRESS | |
| CITY, STATE, ZIP | | 12. CITY, STATE, ZIP | |
| NAME | | 13. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS | | 14. STREET ADDRESS | |
| CITY, STATE, ZIP | | 15. CITY, STATE, ZIP | |

14. I, the undersigned, certify that the information supplied with this filing is accurate, truthful and does not qualify for the exemption stated in Section 601.07(1)(b), Florida Statutes. I further certify that the information contained on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if my name were printed thereon. I am an officer or director of the corporation as of the time my name is printed on this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report or in an attached worksheet.

SIGNATURE: *Cesar Perez* - CESAR PEREZ 4/28/95 238-1875