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Feb 19, 1999 8:00 am  
Secretary of State

02-19-1999 90033 030 \*\*\*150.00

PROFIT CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # P96000059488

1. Corporation Name  
ABSTRACT ELECTRONICS, INC.



Principal Place of Business  
6844 PARK BLVD.  
PINELLAS PARK, FL 33781

Mailing Address  
6844 PARK BLVD.  
PINELLAS PARK FL 33781

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21  
Suite, Apt. #, etc.  
22  
City & State  
23  
Zip Country  
24

2a. Mailing Address  
26  
Suite, Apt. #, etc.  
27  
City & State  
28  
Zip Country  
29

3. Date Incorporated or Qualified  
08/01/1996  
4. FEI Number  
59-3387211  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent  
MIZIO, ARMANDO F  
25400 U.S. 19 NORTH, SUITE 210  
CLEARWATER FL 34623

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  
FL

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. Includes entries for DPT COLANDREA, BRUNO and DVS VINCENT-POTTER, GINGER T.

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. Includes entries 1.1 through 6.4 for additions or changes to officers and directors.

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, with all other like empowered.

SIGNATURE: Bruno Colandrea BRUNO COLANDREA 01/05/99 (727) 547-6500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #