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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**19**98 P97000023250 (8) DOCUMENT # 1. Corporation Name

## **FILED** May 13 1998 8:00am Secretary of State

4 STAF	R ELECTRONICS REPAIR, IN	IC.				 				
Principal Place of Business Mailing Address								, , , , , , ,		
201 SW 27TH AVE. 201 SW 27TH AVE.										
FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 333						DO NOT WRITE IN THIS S	SPACE			
						3. Date Incorporated or Qualified	- AGE	—	•	7
						03/10/1997				
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	- 1-	TAni	plied For	$\dashv$
21		26				[65-0732971]	F		Applicable	7
Suite, Apt.	#, <b>e1</b> C.	Suite, Apt. #, etc.					\$8.		dditional	4
22		27				5. Certificate of Status Desired			quired	
City & Stat	e	City & State				6. Election Campaign Financing	\$5	.00	May Be	
23		28				Trust Fund Contribution			Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the curr	rent ye	ar Inte	ıngible	
24	25	29	30				Yes	X	No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	gent			
	A <b>GG</b> S, HUGHEY G			B1 Na	me					
201 SW 27TH AVE.				<b>82</b> Str	eet Addre	ss (P.O. Box Number is Not Acceptable)				┥
j F0	RT LAUDERDALE FL 33312		[							
]				83						
			}	<b>84</b> Cit			85	Zip C	odo.	$\dashv$
			1		-	FL	1.1	•		1
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the ab	ove-nar	ned corpo	oration submits this statement for the purpose of on's board of directors. I hereby accept the appropriate the properties of the properties of the purpose	chang	ing its	registered	7
agent. I a	m familiar with, and accept the obliga	di Florida. Such change was a diens of, Section 607,0505, Flo	rida Stati	ites.	corporatio	on's board or directors. I hereby accept the app	Jinimer	ıt as r	egisierea	
SIGNATURE										
	Signature, typed or printed hance of registered age-			Agent sign	nature required	d when reinstating) DATE				
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND				_ [
TITLE	D BOACOS DILICHEVO	☐ DELETE	1.1 (1)		- [		☐ Cha	nge	Addition	1
NAME	BRAGGS, HUGHEY G 201 SW 27TH AVE.		1.2 NAI		ĺ					Š
STREET ADDRESS	FORT LAUDERDALE FL 33312	<b>\</b>		REET ADDRI	ESS					Ļ
CITY-ST-ZIP	D D			Y-ST-ZIP			1 20		fin cina	Ļ
TITLE	BRAGGS, GLADYS	☐ DELETE	2.1 TIT				∐ Cha	nge	Addition	
NAME	201 SW 27TH AVE.		2.2 NAI		ĺ					
STREET ADDRESS	_	<b>\</b>		ieet addri						ı
CITY-ST-ZIP TITLE	FORT LAUDERDALE FL 33312			Y-ST-71P		·	I Ob-		Radante -	4
<b>(</b>		DELETE 3.11				☐ Change			Addition	
NAME			3.2 NA							1
STREET ADDRESS				EET ADDRE	:SS					
CITY-ST-ZIP TITLE		DELETE		Y - ST - ZIP			☐ Cha	200	Addition	4
NAME		ר הברדונ	4.1 1(1)				LJ UIIA	nye	Addition	1
			4. 2 NA							
STREET ADDRESS				EET ADDRE	:55	•				
CITY-ST-ZIP TITLE		DELETE	4.4 CIT	Y-ST-ZIP E			Cha	0.70	Addition	-
NAME		€1 officin					UK	ៈមេច	Addition	
STREET ADDRESS			5.2 NAM		-0.					
				EET ADDRE	:05					
CITY-ST-ZIP TITLE		DELETE	5.4 CIT	Y-ST-ZIP	+-		Chai	noe	Addition	-
NAME								-Pc		
STREET ADDRESS			6.2 NAM							
1				EET ADDRE						
CITY-ST-ZIP	415.41	N 405- CD	6.4 CO	(-SI-ZIP						1

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 suppliemental 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.