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PROFIT CORPORATION ANNUAL REPORT



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

4/13/96 (3w) 370-4628

1996

appears in Block 12 or Block 13 if

SIGNATURE:

Principal Place of Business

DOCUMENT # P95000011217 (3)

TECHNOLOGY	DEVELOPMENT	INTERNATIONAL	ELECTRONIC
CORPORATION			

Mailing Address

changed, or on an attachment with an address

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1857 NW 109 AVE 1857 NW 109 AVE PLANTATION FL 33322 PLANTATION FL 33322 3a. Date of Last Report 3. Date Incorporated or Qualified 02/08/1995 Applied For 2. Principal Place of Business 2a. Mailing Address 650568126 Not Applicable 21 26 Suite, Apl. #, etc. \$8,75 Additional Suite Apt. #. etc. 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Ζip Country 2φ. Florida Statutes Yes XNo 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LAM UANG CHOW, HSI K Street Address (P.O. Box Number is Not Acceptable) 82 1857 NW 109 AVE 83 PLANTATION FL 33322 84 PLANTATION 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. Thereby accept the appointment as registered agent. I am familiar with any appear of the obligations of, Section 607.0505, Florida Statutes. 4/13/96 QUANG LAM. SIGNATURE is tere Lagrani and the it as plicatio (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1 1 TITLE TITLE QUANG LAM CR2E034 CHOW, HSI K NAME 1.2 NAME 1857N.W. 109 AVE 1857 NW 109 AVE STREET ADDRESS 1.3 STREET ADDRESS PLANTATION, FL 33322 **PLANTATION FL 33322** 1.4 CITY - ST - 21P CITY - ST - ZIF DELETE Change Addition SD 2.11111.6 TITLE SD CHI H CHOW LAM. LINDA 2.2 NAME NAME 10915 N.W. 18 DR 1857 NW 109 AVE STREET ADDRESS 2.3 STREET ADDRESS PLANTATION FL 33322 2 4 CITY - ST - ZIP PLANTATION, FC 33322 CITY-ST-ZIP Change Addition ☐ DELETE TITLE 3 1 THLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CiTY - ST - ZiP CITY - ST - ZIP DELETE 4 1 711LE ☐ Change Addition TITLE NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4.017 Y - S7 - ZP CHTY - ST - ZIP DELETE Change Addition 5 1 TOLE TITLE 5.2 NAME NAME SISTREE! ACURESS STREET ADDRESS 5.4 CHTY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6 1 THEE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119 07(3)[k]. Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my's gnature 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 I ustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

CHIHSIN CHOW