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

## PROFIT CORPORATION ANNUAL REPORT 1998 OCUMENT #

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S84329

(9)

ACCUSONIC INC.

FILED
Jan 28 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address									<b>                                    </b>		JI <b>Biri</b> i 1891
3097 S.W. 132ND PL. 3097 S.W. 132ND PL.											
MIAMI FL 33175 MIAMI FL 33175								DO NOT WRITE IN THIS SPACE			
U\$ US							3.	3. Date Incorporated or Qualified			
							1	10/02/1991			
	lace of Business		2a. Mailing Ad	2a. Mailing Address				FEI Number		Ар	plied For
21			26					65-0290313		No	t Applicable
Suite, Apt.	#, etc.		<del>}</del>	Suite, Apt. #, etc.			5.	Certificate of Status Desired			Additional
City & State		City & Star	City & State					·	Fee Re	· · · · · · · · · · · · · · · · · · ·	
23	•	·	28			6.	Election Campaign Financing Trust Fund Contribution		5 <b>5.90</b> Added t	May Be	
Zip		Country	Zip				a.	8. This corporation owes or has paid the current year Intangible			
24	25		29	29 30				Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent			
LA	PADULA, ENRI	QUE			81	Name	1				
309	97 SW, 132 PL	1		-			Address (F	ress (P.O. Box Number is Not Acceptable)			
MIAMI FL 33175								<u> </u>			
					83						
					84	City			<b>- 85</b>	Zip (	Code
44.5		70					<del> </del>		FL  °°	<u></u>	<del></del>
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											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register  12. OFFICERS AND DIRECTORS  13						nt signature		n reinstating) ADDITIONS/CHANGES TO OFF	DATE	ECTOR	C IN 10
TITLE	DPST	OFFICERS A		DELETE	1.1 TITLE		T	ADDITIONS/CHANGES TO OFF		Change	Addition
NAME		ENRIQUE JR.	س	D#4612	1.2 NAME					rita igo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	STREET ADDRESS 3097 S.W 132 PL				1.3 STREET ADDRESS						
CITY-ST-ZIP MIAMI FL			1.4 C()				ì				I
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NAME					2.2 NAME		)				,
STREET ADDRESS					2.3 STREET	ADDRESS					
CITY-ST-2IP					2. 4 CITY-5	T- ZIP	<u> </u>				
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NAME					3.2 NAME		!				
STREET ADDRESS				3.3 STREET ADDRESS							
CITY-ST-ZIP				DC LETT	3.4. CITY - S	T-ZIP	<del> </del>				
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NAME					4.2 NAME						
STREET ADORESS					4.3 STREET		}				
CITY-ST-ZIP TITLE				DELETE	4.4 CITY - S	1-ZIP	<del> </del> -		T1(	Change	Addition
NAME					5.2 NAME				۷ لیسا	go	
STREET ADDRESS				1	5.3 STREET	ADDRESS	1				l
CITY-ST-ZIP					5.4 CITY-S						
TITLE	<del></del>			DELETE	6.1 TITLE	- 211	<del> </del>			hange	Addition
NAME			-		6.2 NAME		]		_	-	
STREET ADDRESS				[	6.3 STREET	address					
CITY-ST-ZIP 6.4 CI											
	ertify that the info	mation supplied v	vith this filing does n	ot qualify for th			ed in Section	on 119.07(3)(i), Florida Statutes.	I further certify t	hat the	information

14. Thereby certify that the information supplied with this fliring 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.

SIGNATURE:

giral

1/18/98

(305) 220 8556