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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 351790

(1)

ELECTRONIC SERVICE LABS INC

FILED

Apr 02 1998 8:00am

Secretary of State

Principal Place of Business		Mailing Address		T TANADA KKURI BIJAN JIDIN 14014 IDIN BONI BEBUI BIBNI QIBNI DIAKE DIGUL BUDIN 1800)	
3071 N ORANGE BLOSSOM TR. STE G Orlando fl 32804		3071 N ORANGE BLOSSOM TR. STE G ORLANDO FL 32804		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 09/05/1969	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		58-1076564	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	T 0- 11	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	6. This corporation owes or has paid the cu	
24	25 g, Name and Address of Curre	29	[30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
10		on registered Agent	81 Name	10, reame and Address of New Hegistered	Agent
LOVETT, W. THOMAS					
200 E ROBINSON ST STE 500 ORLANDO FL 32803			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
UN	D41DO FL 32003		83		
			84 City	FL	85 Zip Code
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such change was a	authorized by the corpo	orporation submits this statement for the purpose coration's board of directors. I hereby accept the app	of changing its registered pointment as registered
SIGNATURE					
	Signature, typical or printed name of registered a		E: Registered Agent signature re		
12.	r	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	LOUCKS, BURTON H.		1.2 NAME		
STREET ADDRESS	3071 N OBT STE G ORLANDO FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	SD SD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME :	LOUCKS, MARLENE A.				L Cusude L Magnition
STREET ADDRESS	3071 N OBT STE G		2.2 NAME		
CITY-SI-ZIP	ORLANDO FL		2.3 STREET ADDRESS		
TITLE	SHEWING IL	DELETE	2 4 CHTY-ST-ZIP 3.1 THTLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		•
STREET ADDRESS			4.3 STREET ADDRESS]
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	TOTAL TOTAL AND	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		

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 empawered 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 accuracy.