## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## 383354 **DOCUMENT #**

SIGNATURE:

DIMENSION ELECTRONICS, INC.

.	

**FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90457 039 \*\*\*150.00

4/23/03

Daytime Phone #

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Principal Place of Business 120 E. OAKLAND PARK BLVD. SUITE 105 FT. LAUDERDALE FL 33334			Mailing Address 120 E. OAKLAND PARK BLVD. SUITE 105 FT. LAUDERDALE FL 33334									
2. Principal Place of Business			3. Mailing Address					!	Liiki <b>1701 170</b> 1	\$1411 T1011 B1011 T	1611 <b>4</b> 1811 18 <del>8</del> 1	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & Stat	te		City & S	State			4.	FEI Number	59-178581	2		pplied For ot Applicable
Zip		Country	Zip Country			try	5.	5. Certificate of Status Desired   \$8.75 Addition Fee Required				
	6. Name	and Address of Current	Registered A	gent		^·	<u>۲۰ 7.</u>	Name and Ac	dress of New	Registere	d Agent ~	
LITTLE, ARTHUR 120 E. OAKLAND BLVD. #105						Name Street Address (P.O. Box Number is Not Acceptable)						
FT. LAUDE	ERDALE FL	33334				City				 F	Zip Cod	de
	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE ,	Signature, typed	or printed name of registered agent a	and title if applicable	le. (NOTE:	Registere	d Agent signature	required when r	reinstating)		DATE		í
- Afte	r May 1, 200	PEE IS \$150.00 Fee will be \$550.00 Florida Department of	State						on Campaign F Fund Contribut			00 May Be d to Fees
10.		OFFICERS AND	DIRECTORS		11.		ΑC	ODITIONS/CH	ANGES TO OF	FICERS AN	ND DIRECTOR	IS IN 11
NAME STREET ADDRESS		THUR KLAND PARK #105 RDALE FL 33334		☐ Delete		1					☐ Change	☐ Addition
NAME STREET ADDRESS		(LAND PARK BLVD. #1 RDALE FL 33305	05	Delete		ł					☐ Change	☐ Addition
STREET ADDRESS		.j. (Land Park Blvd. #1 Rdale fl 33334	05	Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete		,					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		i i					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		ł					☐ Change	Addition
indicated of the corp	on this report poration or the	information supplied with or supplemental report is e receiver or trustee empo chment with an address, w	true and acci wered to exec	urate and that my cute this report a	v signat	ure shall hav	e the same	legal effect as	if made under	roath: that	l am an officer	or director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR