FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

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1. Corporatio COMM Principal Place 3336 TYRON	ERCIAL ELECTRONIC SYS		ν o		late of Last Report
2 Principal P	lace of Business	2a, Mailing Address		04/13/1973 4. FEI Number	08/11/1995
21		26		59-1449298	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip	Country	8. This corporation has liability for intangible	
24	9. Name and Address of Curre	29 ent Registered Agent	30	Florida Statutes Yes No. 10. Name and Address of New Registere	
			81 Name	10. Name and Address of Non-Hegister	o Agent
WATSON, JACK ATTY			82 Street Add	tress (P.O. Box Number is Not Acceptable)	
	H STREET NORTH			and State Control of the Control of	
SI PETI	ERSBURG FL 33710		83		
			84 City	F	85 Zip Code
or register familiar w: SIGNATURE	red agent, or both, in the State of Hor th, and accept the obligations of, Sec Syndric Spod or pertid have of a system, a p	ida Such change was aut son 607.0505, Florida Sta sammuragi Samm	tionized by the corporation's boatutes.	oration submits this statement for the purpose of and of directors. I hereby accept the appointment state meeting.	as registered agent. Lam
12.	OFFICERS AN	NO DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	··· <u>····</u>
NAME	EWIN, WILLIAM E	pricic	1 1 TITLE 12 NAME		Change
STREET ADDRESS	2849 62ND ST NO		1.3 STREET ADDRESS		
CITY - ST - ZiP	ST PETERSBURG FL		1.4 CHY-ST-ZIP		,
TITLE	P	DELETE	2 1 T-11 F		Change Addition
NAME	EWIN, WILLIAM E III		2.2 NA*ME		
STREET ADDRESS	1846 COUNTRY CLUB RD		2.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	ST PETERSBURG FL	DELETE	2.4 City - St - ZiP		
NAME	EWIN, MARIE A		3 1 11111		Change Addition
STREET ADDRESS	2849 62ND ST N		3.2 NAME 3.3 STREET ACORESS		
CITY-ST-ZIF	ST PETERSBURG FL		3.4 CiT v - ST - 7/9		
TITLE	VP	☐ DELETE	4 ' TITLE		Change Addition
NAME	EWIN, TERRENCE		4.2 NAME		
STREET ADDRESS	1415 29TH AVENUE N.		4.3 STREET ADDIRESS		
CITY - ST - ZIP	ST PETERSBURG FL		4.4 CITY - \$! - 7/P		
TITLE		DELETE	5 1 T.TLE		☐ Change ☐ Addition
NAME STREET ADDRESS			5 2 NAME		
STREET ADDRESS CITY+ST-ZIP			5.3 STREET ADDRESS		
TITLE		DELETE	5 4 CHY - ST - ZIF 6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		T cominge T vacantit
STREET ADDRESS			63 STHEFT ADDRESS		
City-S1-ZiP			6.4 City - St - ZiP		
14. I do hereb	y certify that the information supplied	with this filing is voluntarily		for the exemption stated in Section 119 07/3/kt. I	Florida Statutas I further

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information indicated on this amenia' 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.

IGNATURE:

SIGNATURE:

SIGNATURE OF FINITED OR PRINTED VALUE OF SIGNING OFFICER OR DIRECTOR

Det.

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