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

**PROFIT** CORPORATION ANNUAL REPORT



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 DOCUMENT # 434549

1, Corporation Name

ADM ELECTRONIC PRODUCTS INC

FILED
Apr 29, 1999 8:00 am
Secretary of State
0.4.00.4.000.001.00.01.6.0004.7.0.00

04-29-1999 90108 016 \*\*\*150.00

ANK ELE	CIMONIC PRODUCTS, INC.										
Principal Place	e of Business	Mailing Address									GR 91811 1891
C/O TAX CEPA		C/O TAX DEPARTMENT									
P.O. BOX 2826		P.O. BOX 2826									
LARGO FL 3377	79-826	LARGO FL 33779-826				DO NOT		I THIS	SPACE	<u> </u>	<del></del>
บร		US				3. Date ncorporated or Qua 09/07/1973	lited				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			<u> </u>	<del></del> -	lied For
	- 126th Ave. N.,	<b>26</b> 8545 <b>-</b> 1261	th Ave.	N	<u> </u>	59-1426902					Applicable
Suite, /ւpt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desire	ed 🗆				dditional juired
City & Stat		City & State				6. Election Campaign Finance	cing $\Box$		,		May Be
	o, Florida	28 Largo, Flc				Trust Fund Contribution				ded t	Fees
Zip	Country	Zip	Countr	•		8. This corporation owes the	current y			. 1	⊠No
24 33773		[29] 33773	30 U	<u>JSA</u>		Perso all Property Tax.  10. Name and Address of N	ow Pegis		Yes		ZNO
	9. Name and Address of Current	Registered Agent	81	1 N	lame	10. Name and Address of N	ew regis	ker <u>ga A</u>	yent		
er c	CORPORATION SYSTEM										
1	S. PINE ISLAND ROAD		82	2 8	treet A Id	ress (P.O. Box Number is Not Ac	ceptable)				
	NTATION FL 33324		83	3							
ĺ									<del>,</del> ,		
			84	4 C	ity			FL	85	Zip C	øde
office or r	to the provisions of Sections 607,0502 egistered agent, or both, in the State of	if Florida. Such change was a	authorized by	y the	amed corp corporati	poration submits this statement to ion's board of directors. I hereby a	ccept the	appoin	tment	as reç	egistered istered
office or r	to the provisions of Sections 607,0502 egistered agent, or both, in the State of m familiar with, and a scept the obligat	of Florida. Such change was a ons of, Section 607.0505, Fl.	authorized by orida Statute	y the es.	corporation	poration submits this statement to on's board of directors. I hereby a ad when reinstating)	accept the	appoin	tment	as reç	egistered
office or r agent. I a	egistered agent, or bcth, in the State on familiar with, and accept the obligat signature, typed or printed name of registered agent OFFICERS ANC	ons of, Section 607.0505, FI and title if applicable (NOT)	authorized by orida Statute	y the es.	corporation	ion's board of directors. I hereby a	occept the	appoin	DIRE	as reç	RS IN 12
office or r agent. I a SIGNATUF:E	egistered agent, or bcth, in the State om familiar with, and accept the obligat  Signature, typed or printed name of registered agent  OFFICERS AND	ons of, Section 607.0505, FI	authorized by orida Statute	y the	corporation	on's board of directors. I hereby a	occept the	appoin	tment	as reç	ıstered
office or r agent. I a SIGNATUF:E	egistered agent, or bt th, in the State of m familiar with, and accept the obligat   Signature, typed or printed nome of registered agent  OFFICERS AND  PD  MURPHY, PATRICK M	ons of, Section 607.0505, FI and title if applicable (NOT)	authorized by orida Statute Registered Age	y the	corporation	on's board of directors. I hereby a	occept the	appoin	DIRE	as reç	RS IN 12
office or r agent. I a SIGNATUF:E 12.	egistered agent, or bt th, in the State of m familiar with, and accept the obligat  Signature, typed or printed nome of registered agent  OFFICERS AND  PD  MURPHY, PATRICK M  3202 W KNIGHTS AVE	ons of, Section 607.0505, FI and title if applicable (NOT)	E: Registered Age  13.	y the	nature require	on's board of directors. I hereby a	occept the	appoin	DIRE	as reç	RS IN 12
office or ragent. I a SIGNATUF:E  12. TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL	ons of, Section 607.0505, FI:  and title if applicable (NOT)  DIRECTORS	authorized by rida Statute  Registered Age  13. 1.1 TITLE 1.2 NAME 13 STREE	ent sig	nature require	on's board of directors. I hereby a	occept the	appoin	O DIRE	es reç	S IN 12 ☐ Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD	ons of, Section 607.0505, FI and title if applicable (NOT)	Registered Age 13. 1.1 TITLE 1.2 NAME	ent sig	nature require	on's board of directors. I hereby a	occept the	appoin	DIRE	es reç	RS IN 12
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature. Niped or printed name of registered agent OFFICERS AND PD MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L.	ons of, Section 607.0505, FI:  and title if applicable (NOT)  DIRECTORS	authorized by rida Statute  Registered Age  13. 1.1 TITLE 1.2 NAME 13 STREE	ent sig	nature require	on's board of directors. I hereby a	occept the	appoin	O DIRE	es reç	S IN 12 ☐ Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI:  and title if applicable (NOT)  DIRECTORS	authorized by brida Statute  E. Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 TITLE	ent sig	nature req are	on's board of directors. I hereby a	occept the	appoin	O DIRE	es reç	S IN 12 ☐ Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature. Niped or printed name of registered agent OFFICERS AND PD MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L.	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE	E. Registered Agriculture 13.  1.1. TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ent sig	nature req ire	on's board of directors. I hereby a	occept the	appoin	O DIRE	CTOF	S IN 12 ☐ Addition ☐ Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI:  and title if applicable (NOT)  DIRECTORS	E. Registered Agriculture 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE	y the es.	nature req ire	on's board of directors. I hereby a	occept the	appoin	DIRE	CTOF	S IN 12 ☐ Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE	E. Registered Agriculture 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	y the ess.	nature require	on's board of directors. I hereby a	occept the	appoin	O DIRE	CTOF	S IN 12 ☐ Addition ☐ Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRE SS. CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE	authorized by brida Statute  Registered Agr 13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.3 STREE	y the ss. ent sig	nature require	on's board of directors. I hereby a	occept the	appoin	O DIRE	CTOF	S IN 12 ☐ Addition ☐ Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRE SS CITY-ST-ZIP	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	E. Registered Agriculture 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 3.4 CITY- 3.4 CITY- 3.4 CITY-	y the ss.  ET ADC  ST-ZIF  ET ADC  -ST-ZIF  -ST-ZIF	nature require	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	ECTOI ninge	S IN 12 Addition Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE	in the state of th	y the ent sign ent si	nature require	on's board of directors. I hereby a	occept the	appoin	O DIRE	ECTOI ninge	S IN 12 ☐ Addition ☐ Addition
office or ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	y the ess.	DRESS DRESS P	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	ECTOI ninge	S IN 12 Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	authorized by brida Statute  Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE	y the ess.	DRESS DRESS P DRESS	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	ECTOI ninge	S IN 12 Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 2.3 STREE 2.4 CITY-3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	y the ess.	DRESS DRESS P DRESS	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	ECTOP inge	S IN 12 Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	authorized by brida Statute  Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE	y the ess.	DRESS DRESS P DRESS	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	ECTOP inge	S IN 12 Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	authorized by brida Statute  Registered Agrida Statute  13. 1.1 TITLE 12 NAME 13 STREE 22 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 5.1 TITLE 5.2 NAME 5.1 TITLE 5.2 NAME	ent signer and signer	DRESS P DRESS P DRESS	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	ECTOP inge	S IN 12 Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE	ent sig	DRESS DRESS DRESS DRESS DRESS DRESS	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	ECTOP inge	S IN 12 Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE  DELETE  DELETE	authorized by brida Statute  Registered Agrida Statute  13. 1.1 TITLE 12 NAME 13 STREE 22 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 5.1 TITLE 5.2 NAME 5.1 TITLE 5.2 NAME	y the eys.  EET ADD  ST-ZIF  EET ADD  ST-ZIF  EET ADD  ST-ZIF  EET ADD  ST-ZIF  ST-ZIF  ST-ZIF  ST-ZIF  ST-ZIF  ST-ZIF  ST-ZIF	DRESS DRESS DRESS DRESS DRESS DRESS	on's board of directors. I hereby a	occept the	appoin	Cha	as rec	S IN 12 Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE DELETE	authorized by brida Statute  Registered Agrida Statute  13. 1.1 TITLE 12 NAME 13 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.5 TITLE 5.5 NAME 5.5 STREE 5.4 CITY-	ent signer signe	DRESS DRESS DRESS DRESS DRESS DRESS	on's board of directors. I hereby a	occept the	appoin	D DIRE Cha	as rec	S IN 12 S IN 12 Addition Addition Addition Addition
office of ragent. I a SIGNATUF:E  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bt th, in the State of m familiar with, and accept the obligat Signature, typed or printed nome of registered agent OFFICERS AND MURPHY, PATRICK M 3202 W KNIGHTS AVE TAMPA FL SD SLATTERY, JAMES L. 2065 HUNTERS GLEN DR 403	ons of, Section 607.0505, FI: and title if applicable (NOT) DIRECTORS DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 6.1 TITLE 5.4 CITY- 6.1 TITLE 5.4 CITY- 6.1 TITLE	ent signer signe	DRESS DRESS P DRESS P DRESS	on's board of directors. I hereby a	occept the	appoin	Cha	as rec	S IN 12 S IN 12 Addition Addition Addition Addition

14. 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 empowered be execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 inchanged, or on an attachment with an afteress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(727) 530-2977 Daytime Phone #

CR2E034 (11/98)