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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 489961

(3)

VIKING MARINE ELECTRONICS, INC.

Mailing Address Principal Place of Business 17 NW 45 AVENUE 17 NW 45 AVENUE PLANTATION FL 33317-3121 PLANTATION FL 33317 3. Date Incorporated or Qualified 3a. Date of Last Report 11/12/1975 02/20/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1631387 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country  $Z_{\rm IP}$ Country Zip This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PIHL. ROBERT C 17 N.W. 45 AVE. Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33317 83 City R4 Zip Code 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 per tour avoir of registered agent god tits of applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. PTD DELETE Change Addition 1!TLE 1.1 TITLE PIHL, ROBERT C. 1.2 NAME CR2E034 NAME 17 N.W. 45 AVE. 1.3 STREET ADDRESS STREET ADDRESS **PLANTATION FL** CITY-ST-ZIF 1.4 CITY - ST-ZIP DELETE Change Addition TITLE 2 1 TITLE PIHL, SUSAN J 2.2 NAME 17 NW 45TH AVE 2.3 STREET ADDRESS STREET ADDRESS PLANTATION, FL 00000 2.4 CITY-ST-ZIP CHTY - ST- ZIP DELETE Addition ☐ Change THILE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS DITY - ST - ZIP 3.4. CITY - ST- 2IP Addition DELETE Change TITLE 4.1 HITE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST-- ZIP CITY - ST - ZIF DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST - ZIF DELETE Change Addition TITLE 6.1 THE

> 6.2 NAME 6.3 STREET ADDRESS

14. I do 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

6.4 CHTY-ST-ZIP

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

SIGNATURE:

STREET ADDRESS.

ROBERT C. PHL PRESIDENT 07 JAN. 1997 954-584-791

**FILED** 

Jan 15 1997 8:00am

Secretary of State