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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

509990 **DOCUMENT #**

(8)

E.D.S. ELECTRONICS, INC.

Principal Place of Business Mailing Address									
960 NE 79TH ST 960 NE 79TH ST MIAMI FL 33138 MIAMI FL 33138									
MIAMI FL 331	30	WINTER TE GOTO			3. Date Incorporated or Qualified 3a. Date of Last Report 08/13/1976 05/01/1995				
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number	l		Applied For
1]		26	—¬			59-1687643			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	=			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		Crty & State	¬ ·			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees		
Zip Country		Zip	Zip Country			8. This corporation has liability for it		under :	s 199.032,
4	25 29		30			Florida Statutes Yes No			
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	egistered A	gent	
					Name				
DE SALLES PEREIRA, WALDOMIRO			Į	82	Street Addre	ess (P.O. Box Number is Not Acceptab	ie)		
	ST DR. #16		83						
MIAMI FI	L 33141		ľ	63					
				В4	City		FL	85 7	Zip Code
2-6	H Continue CO7 0500	and 607 1509 Florida Statut	es the abov	/O - D:	amed cornor	ation submits this statement for the pur	pose of char	vaino its	registered office
familiar wit	h, and accept the obligations of, Sect	ion 607.0505, Florida Statutes	S.			d of directors. I hereby accept the appo			
	Signature typed or printed name of registered agent		OTE Registered a	Agent	t signatura required	d when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIBECT	ORS IN 12
12.	OFFICERS AN	OFFICERS AND DIRECTORS DELETE		1. 1 TITLE		ADDITIONS OF ANGEO TO OFF] Change	
TITLE NAME	FORTES, MIRENE		12 NA						
STHEET ADDRESS	7925 W DR APT 19				ADDRESS				
CHY-ST-7IP	MIAMI FL		1.4 CIT	IY-SI	T- ZIP				
THE	T	DELETE	2 1 Ti] Chançe	Addition
NAME	VEGA, JOSE M		2 2 NA	ME					
STHEET ADDRESS	1810 DAYTONIA RD MB		2 3 ST	REET	ADDRESS				
CITY - ST - ZIP	MIAMI FL		2400	TY-\$1	I - ZiP		····		
TITLE	PD	DELETE	3 1 TI	TLE			Ĺ] Change	Addition
NAME	DE SALLES PEREIRA, W		3.2 NA	ME					
STREET ADDRESS	7925 W DR APT 19		- 1		ADDRESS				
CITY-ST-ZIP	MIAMI BCH, FL 00000	EXCOURT	3.4 CI		T-ZIP			7 Chang	e [] Addition
THILF	VM VEDDY SCOTT	E DELETE	4. 1 Tl				Ļ_	_	
NAME	KOZIAL, KERRY, SCOTT 7946 E DR APT 202		4.2 NA		ADDRESS				
STREET ADORESS	MIAMI BEACH FL		4.3 SI						
CITY-ST-ZIP TITLE	menn benefit t	DELETE	5 1 Ti					Chang	e 🔲 Addition
NAME		<u></u>	5.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					ST - ŽIP				
TITLE		DELETE	6. 1 T					Chang	e 🔲 Addition
NAME			62 N/	AME	1				
STREET ADDRESS			6351	TREET	ADDRESS				
	1				- 1				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE.