## 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 # 509990

(8)

E.D.S. ELECTRONICS, INC.

**FILED** Apr 30 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address  960 NE 79TH ST  960 NE 79TH ST								
MIAMI FL 9313	16	MIAMI FL 33138-4716			`			
					3. Date Incorporated or Qualified 08/13/1976 3a. Date of Last Report 05/01/1996			eport
2. Principal Place of Business 2a. Mailing Address					4, FEI Number		Ap	plied For
21		26		<del></del>	59-1687643			t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired		Fee Re	
23 28			y & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	•		Country		8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 9. Name and Address of Current Registered Age		30		Florida Statutes			
	<del></del>	ur uafieteten wäeut	8	1 Name	10, Name and Address of New Ke	lisieten Ağen	<u> </u>	
	SALLES PEREIRA, WALDOMIRO		ľ					
7925 WEST DR. #16 MIAMI FL 33141			8		dress (P.O. Box Number is Not Acceptab	le)		
			8	3				
			8	4 City		E-1 85	Zip (	Code
44 Duranian	to the provision of Continue CO7 OF	00 and 007 4500 Florida Oct	utan ahn chi-		rporation submits this statement for the pation's board of directors. I hereby accept	FL °		n ====================================
SIGNATURE	Signature, typed or printed name of registered ag OFFICERS AN	ert and title if applicable (NO ID DIRECTORS	O'E: Registered A	gent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC			IS IN 12
TITLE	8	DELETE	1.1 TITLE	:			Change	Addition
NAME	FORTES, MIRENE		1.2 NAMI	£				
STREET ADDRESS	7925 W DR APT 19		1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	MIAMI FL	T AFLETE	1.4 CITY				<u> </u>	
TITLE	VEGA, JOSE M	☐ DELETE	21 TITLE	)			Change	Addition
,NAME	1810 DAYTONIA RD MB		22 NAM					
STREET ADDRESS	MIAMI FL			ET ADDRESS				
CITY-ST-ZIP TITLE	PD	☐ DEL€TE	2. 4 CITY 3.1 TITLE				Change	Addition
:NAME	DE SALLES PEREIRA, W		3.2 NAMI	!				
STREET ADDRESS	7925 W DR APT 19			ET ADDRESS				
CITY-ST-ZIP	MIAMI BCH, FL 00000		3 4. CITY	1				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY					
TITLE		☐ DELETE	5.1 TITLE			□ (	Change	Addition Addition
NAME			5.2 NAM					
STREET ADDRESS			. I	ET ADDRESS				
CITY-ST-ZIP		☐ DEŁÉTE	5.4 Cily -				`hanne	Addition
TITLE		LJ ULCEIL	6.1 TITLE	Y			Change	Addition
NAME OTREET ADDRESS			6.2 NAMI					
STREET ADDRESS				ET ADDRESS				
CITY ST ZIP	i		64 CITY	- 51-7IF				

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 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.