

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 AM 11:40

DOCUMENT # 558457 (8)

1. Corporation Name

MINEOLA ELECTRONIC SUPPLY, INC.

Principal Place of Business

4574 DYER BLVD
PO BOX 3321
W PALM BCH. FL 33411 33407
US

Mailing Address

4574 DYER BLVD
W PALM BCH. FL 33411 33407
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/30/1978

3a. Date of Last Report

01/25/1994

4. FEI Number

59-1778961

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 4574 DYER BLVD

2a. Mailing Address

26 SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 W PALM BEACH, FL 33407

City & State

28 W PALM BEACH, FL 33407

Zip

Country

24 33407 25 PALM BEACH

Zip

Country

30 33407 31 FL

9. Name and Address of Current Registered Agent

GOLDBERG, JACOB
4574 DYER BLVD.
WEST PALM BEACH FL 33407

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person named in registered office and the registered agent

Signature of Registered Agent (signature required when change of agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
PTD
GOLDBERG, ELAINE
329 PENNINGTON CT
ROYAL PALM BCH, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 NAME ☐ Change ☐ Addition

15 STREET ADDRESS

16 CITY, ST, ZIP

17 NAME

18 STREET ADDRESS

19 CITY, ST, ZIP

20 NAME

21 STREET ADDRESS

22 CITY, ST, ZIP

23 NAME

24 STREET ADDRESS

25 CITY, ST, ZIP

26 NAME

27 STREET ADDRESS

28 CITY, ST, ZIP

29 NAME

30 STREET ADDRESS

31 CITY, ST, ZIP

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

35 NAME

36 STREET ADDRESS

37 CITY, ST, ZIP

38 NAME

39 STREET ADDRESS

40 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished, and does not qualify for the exemption stated in Section 119.07(6)(b), 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 recorder 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:

Elaine Goldberg ELAINE GOLDBERG

1/2/95

907-867-8238

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Number