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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

Principal Place of Business

567881

(8)

Mailing Address

PROTO CIRCUITS OF FLORIDA, INC.

ŀ	ILEL	)
Apr 27	1998	8:00am
Secret	tary o	f State



6610 NW 21ST AVE. FORT LAUDERDALE F	FL 33309	661D NW 21ST AVE. FORT LAUDERDALE FL 33309		DO NOT WRITE IN THIS SPACE		
				<ol> <li>Date Incorporated or Qualified 04/06/1978</li> </ol>		
2. Principal Place of Business		2a. Mailing Add	dress	4. FEI Number	Applied For	
1		26		59-1820452	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt.	#, elc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 4	Country 25	Ζ <sub>1</sub> ρ <b>29</b>	Country 30	This corporation owes or has paid the corporation owes or has paid the corporation owes or has paid the corporation.	urrent year Intangible  Yes \[ \] No	
9, Na	ame and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered	Agent	

CLIFFORD L. BRANAM 4751 GODFREY ROAD **SUITE 209** CORAL SPRINGS FL 33067

82	Street Address (P.O. Box Number is Not Acceptable)		
83			
84	City	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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

81 Name

SIGNATURE

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VSD	☐ DELFTE	11 TITLE	Change Addition		
NAME	SMITH, SALLY E		1.2 NAME			
STREET ADDRESS	6611 NW 20 AVENUE		1.3 STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE, FL00000		1.4 CITY-ST-ZIP			
TITLE	D	DELFTE	2.1 TITLE	Change Addition		
NAME	PAYNE, GINGER R		2.2 NAME			
STREET ADDRESS	6610 NW 21ST AVENUE		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY - ST- ZIP			
TITLE	סוק	DELETE	3.1 Trille	Change Addition		
NAME	<b>B</b> ranam, Clifford L		3.2 NAME	·		
STREET ADDRESS	6811 NW 20TH AVE		3.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 00000 FL 33309		3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition		
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	-	DELETE	5.1 TITLE	Change Addition		
NAME			52 NAME			
STREET ADDRESS			53 STREET ADDRESS			
CITY-ST-ZIP			54 CITY-ST-ZIP			
TITLE		☐ DELETE	61 TITLE	Change Addition		
NAME			62 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			

14. I 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.