

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 607313

(4)

1. Corporation Name

COILTRONICS, INC.

Principal Place of Business

6000 PARK OF COMMERCE BLVD  
BOCA RATON FL 33487  
US

Mailing Address

6000 PARK OF COMMERCE BLVD  
BOCA RATON FL 33487  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

01/19/1979

3a. Date of Last Report

04/11/1995

4. FEI Number

59-1882393

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

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

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SOULE, BRUCE D.  
289 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33334

10. Name and Address of New Registered Agent

81 Name

Peter Rose

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

2101 North Andrews Ave

83 Suite

Suite 200

84 City

Fort Lauderdale

FL

85 Zip Code

33311

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

*Peter Rose*

(Name of Registered Agent Signature Required when Renalating)

Peter Rose

3/13/96

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE  
NAME HAYDEN, LYNN A.  
STREET ADDRESS 15560 82ND TERR N  
CITY-ST-ZIP PALM BCH GARDENS FL

TITLE VP ☐ DELETE  
NAME BRADLEY, RANDALL J.  
STREET ADDRESS 1500 NE 34ST  
CITY-ST-ZIP POMPANO BCH FL

TITLE VP ☐ DELETE  
NAME TOBIN, JEFF  
STREET ADDRESS 276 NW 117 AVENUE  
CITY-ST-ZIP CORAL SPRING FL

TITLE VP ☐ DELETE  
NAME BEERS, ROBERT B  
STREET ADDRESS 4110 NW 78TH WAY  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Lynn A. Hayden*

3/13/96

DATE

407241 7876

Daytime Phone

CR2E034 (12/95)