

VO2-0224

2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 21, 2001 8:00 am Secretary of State

02-21-2001 90018 001 \*\*\*150.00

DOCUMENT # 675796

1. Entity Name TEI ELECTRONICS INC.

Principal Place of Business 570 W 18TH ST PO BOX 246 ZIP 33011 HIALEAH FL 33010

Mailing Address 570 W 18TH ST PO BOX 246 ZIP 33011 HIALEAH FL 33010

00019102



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number 59-2064846 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUNIZ, MIREYA A 7900 OLD CUTLER RD CORAL GABLES FL 33143

Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Table with 2 main columns: 11. OFFICERS AND DIRECTORS and 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Rows include officer details like name, title, and address.

13. 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 report or supplemental report is true and accurate...

SIGNATURE: [Signature] VP 2/10/01 305-488-3980 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)