## 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 # 687706

(2)

ARK ELECTRONIC EXPORT, INC.

## **FILED** May 16 1997 8:00am Secretary of State



				<u> </u>	PIETE BIOTI BIBLI BIJE: 1	
Principal Place of Business Mailing Address				t 100110 Billio (Bid) (Abil deeld abild Olice		
8545 12TH AVENUE NORTH	8545 12TH AVENUE NORTH					
P O BOX 2826 C/O TAX DEPT LARGO FL 34649-2826	P O BOX 2826 C/O TAX DE LARGO FL 33779-2826	:P1				
US	US			3. Date Incorporated or Qualified	3a. Date of Last Report	
				09/05/1980	05/01/199	6
2. Principal Place of Business	2a. Mailing Address	:		4. FEI Number	<b> </b>	Applied For
21	26			59-2024840		Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	i		5. Certificate of Status Desired	1 1 '	5 Additional
22 City & State	City & State	i	<del></del>	Fee Required		
23	28			Election Campaign Financing     Trust Fund Contribution		00 May Be led to Fees
Zip Country	Zip	Countr	· · · · · · · · · · · · · · · · · · ·		<del></del>	
2425	├──1 '	30	,	8. This corporation has liability for in Florida Statutes	ntangible tax unde Yes [] No	er s. 199.032,
9. Name and Address of Current		301		10. Name and Address of New Re		
EDWARD J SILBERHORN		81	Name		<u> </u>	
1825 SOUTH RIVERVIEW DRIVE		:			<del> </del>	
MELBORUNE FL		82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
INCOMPLETE		83	<u> </u>			
		84	City		FL 85	Zip Code
15. Pursuant to the provisions of Sections 607 0503	2 and 607 1508. Florida Statuto	s the abov	e-named corr	noration submits this statement for the r		na its registered
<ol> <li>Pursuant to the provisions of Sections 607.0502</li> <li>office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation</li> </ol>	of Florida. Such change was autions of, Section 607.0505, Flor	uthorized b	y the corpora	tion's board of directors. I hereby accep	t the appointment	t as registered
SIGNATURE						
Signature, typed or printed name of registered agor  12. OFFICERS AND		13.	jeni sigriature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIRECT	TORS IN 12
TITLE VSD	DELETE	1.1 11111	- <del></del>	ADDITIONS/OFFANGES TO OFFIC	Chan	
NAME SLATTERY, JAMES L.		1.2 NAME			Since:	.go
STREET ADDRESS 8545 126TH AVE N	5 128TH AVE N		T ADDRESS			ì
CITY-ST-ZIP LARGO FL			STREET ADDRESS CITY-ST-ZIP			
TITLE	DELETE	2.1 TITLE	31-217		Chan	ige Addition
NAME	2.2		1		<u></u>	
STREET ADDRESS			T ADDRESS			
CITY-ST-ZIP		2 4 City	ı			
TITLE	DELETE	31 TITLE	- 51- ZIF		Chan	nge Addition
NAME :	_ <u> </u>		1		ى د	
STREET ADDRESS		3.2 NAME	T ADDRESS			ļ
City-ST-ZP		3.4. CITY -	I .			
TITLE	DELETE	4.1 TILE	31-71		Chan	ipe Addition
NAME		4. 2 NAME			Land Viller	
STREET ADDRESS			1 ADDRESS			
City-St-2IP		4.4 CITY-	I .			
TITLE	DELETE	5.1 TITLE	OT EM		Char	nge Addition
NAME		5.2 NAME				
STREET ADDRESS			T ADDRESS			
CITY-ST-ZIP		5.4 CITY-				
TITLE	DELETE	6.1 TITLE	31*21		Char	nge Addition
NAME	- viceir	6.2 NAME	1		La Vilai	.8
STREET ADDRESS			T ADDRESS			
CITY-ST-ZIP			i			
14. I do hereby certify that the information supplied	with this filing does not qualify	64 ¢IIY-		d in Section 119.07(3)(i). Florida Statute	s. 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 received 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 chapted, or on in atticities and that my name and one of the corporation of the corpor