FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996

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

APPROVED
AND
FILED

96 FEB -5 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 824951 (8)

1. Corporation Name

BROWNELL ELECTRO, INC.

Principal Place of Business	Mailing Address
250 NO RTE 303 CONGERS NY 10920 US	% AVENT, INC 80 CUTTER MILL RD GREAT NECK NY 11021 US

3. Date Incorporated or Qualified: 08/17/1970
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business — 21
2a. Mailing Address — 26

Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 13-5530320 ☐ 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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 607.1605, 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 _____ DATE
Signature, typed or printed name, and title of officer or director
NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	DAVIDSON JOHN		1.2 NAME	
STREET ADDRESS	250 NORTH ROUTE 303		1.3 STREET ADDRESS	
CITY-ST-ZIP	CONGERS NY		1.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MACHIZ, LEON		2.2 NAME	
STREET ADDRESS	80 CUTTER MILL ROAD		2.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY		2.4 CITY-ST-ZIP	
TITLE	VSTD	☐ DELETE	3.1 TITLE	
NAME	SADOWSKI, RAYMOND		3.2 NAME	
STREET ADDRESS	80 CUTTER MILL RD		3.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK, NY.		3.4 CITY-ST-ZIP	
TITLE	AS	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	PALUMBO, LISA M		4.2 NAME	
STREET ADDRESS	80 CUTTER MILL RD		4.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY		4.4 CITY-ST-ZIP	
TITLE	C	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	BUSCEMI,JAMES		5.2 NAME	
STREET ADDRESS	250 NORTH ROUTE 303		5.3 STREET ADDRESS	
CITY-ST-ZIP	CONGERS NY		5.4 CITY-ST-ZIP	
TITLE	VSD	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	BIRK, DAVID		6.2 NAME	
STREET ADDRESS	80 CUTTER MILL ROAD		6.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY		6.4 CITY-ST-ZIP	

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****200.00 ****200.00

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)(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.

SIGNATURE: _____ January 24, 1996 (516) 466-7000

CR2E034 (12/95)