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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 21 1998 8:00am Secretary of State

Change

Addition

DOCUMENT # F00901 (1)								
INTER	TRONIC LTD., INC.							
Principal Place of Business Mailing Addres			is					
c/o Rob	ert L. Feldman, Esq.	c/o :	Robert	L Felo	lman, E	sa.		
, ,	illa Avenue Suite 30					305		
300 Sevilla Avenue Suite 305 300 Sevilla Av Coral Gables FL 33134 Coral Gables F						DO NOT WHITE IN THIS SI ACE		
•				П 22124		3. Date Incorporated or Qualified		
US US						10/09/1980		
	Place of Business	2a. Mailing Address					oplied For	
21		26					ot Applicable	
Suite, Apt	#, etc.	Suite, Apt. (Suite, Apt. #, etc.			E Contribate of Status Degree	Additional	
22		27				Fee Re	equired	
City & Stat	le	City & State	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip		Country		8. This corporation owes or has paid the current year In		
24 25 29			30				No No	
	g. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent		
				81	Name			
FELDMAN, ROBERT L. ESQ 82 Street Address (ess (P.O. Box Number is Not Acceptable)		
300 SEVILLA AVENUE					ess (P.O. box Number is Not Acceptable)			
SUITE 305								
	L GABLES FL 33134							
CORA	T AMDIES ET 23124			84	City	85 Zip	Code	
dd Dilain	the contract Contract COZ DECC		edo Ctotutos	1 1		FL.	to replatered	
office or	to the provisions of Sections but usuz registered agent, or both, in the State (and 607.1508, Fiol of Florida. Such cha	aga Stattites, ngo was auth	ne above horized by	the corporat	oration submits this statement for the purpose of changing it ion's board of directors. I hereby accept the appointment as	registered	
agent. I a	am familiar with, and accept the obligat	ions of, Section 60	7. 0 505, Florid	la Statutes			_	
SIGNATURE			····					
	Signature, typed or plinted name of registered agen		(NOTE A		it signature requir	ed when reinstating) DATE		
12.	OFFICERS AND		F. FT.	13.	<u>-</u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
TITLE	DPT	□ !)ELETÉ	1.1 TITLE		Change	☐ Addition	
NAME	LETANNEUR, JACQUES			1.2 NAME				
STREET ADDRESS 4528 S.W. 24TH ST.			1.3 STREET	address				
CITY-ST-ZIP FT. LAUDERDALE FL.				1.4 CITY-S1	- ZIP			
TITLE	V □ DELETE			2.1 TOTLE		Change	Addition	
NAME	TRIAY, L.W.			2.2 NAME				
STREET ADDRESS STE. 1, GIBRALTER HTS.				2.3 STREET	ADDRESS			
CITY-ST-ZIP GIBRALTER				2. 4 CITY - S	- 1			
TITLE			DELETE	3.1 TITLE	1-211	Change	Addition	
	3			3.2 NAME	-	s.ia.igs		
NAME LETANNEUR, JACQUES								
10-0 01111 011				3.3 STREET	1			
CITY-ST-ZIP					T-ZIP			
TITLE	1					[] Change	☐ Addition	
				4. 2 NAME	600002532546			
STREET ADDRESS 300 SEVILLA AVENUE #305			4.3 \$TREE1	3 STREET ADDRESS -05/22/9801007048				
CITY-SI-ZIP CORAL GABLES FL				4.4 CITY - ST	- ZIP	***150.00		
TITLE			ELETE	5.1 TITLE		Change	Addition	
NAME				5.2 NAME				

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.

6.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

61TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

Pohert I. Feldman 4/30/90 / 300 ..