

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

10f2

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F13970

(1)

1. Corporation Name

C & E ELECTRONICS, INC.

Principal Place of Business

6578 CENTRAL AVE
ST PETE FL 33707

Mailing Address

6578 CENTRAL AVE
ST PETE FL 33707

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/08/1981

3a. Date of Last Report

07/26/1996

4. FEI Number

59-2043362

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 owes or has paid the current year Intangible
Personal Property Tax due June 30

☐

Yes

☐

No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

FINCH, CHARLES
703 BOCA CIEGA ISLE
ST. PETERSBURG FL 33706

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 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| | | | |
|----------------|-------------------------|--------------------------|--------|
| TITLE | P | <input type="checkbox"/> | DELETE |
| NAME | FINCH, CHARLES | | |
| STREET ADDRESS | 703 BOCA CIEGA ISLE | | |
| CITY-ST-ZIP | ST PETERSBURG, FL 00000 | | |
| TITLE | S | <input type="checkbox"/> | DELETE |
| NAME | FINCH, EDNA | | |
| STREET ADDRESS | 703 BOCA CIEGA ISLE | | |
| CITY-ST-ZIP | ST PETERSBURG, FL 00000 | | |
| TITLE | VP | <input type="checkbox"/> | DELETE |
| NAME | BRESSMAN, EDWARD | | |
| STREET ADDRESS | 13444 SOL VISTA DR. | | |
| CITY-ST-ZIP | LARGO FL | | |
| TITLE | T | <input type="checkbox"/> | DELETE |
| NAME | BRESSMAN, SHERI | | |
| STREET ADDRESS | 13444 SOL VISTA DR. | | |
| CITY-ST-ZIP | LARGO FL | | |
| TITLE | | <input type="checkbox"/> | DELETE |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> | DELETE |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | | | |
|--------------------|--------------------------|--------|--------------------------|----------|
| 1.1 TITLE | <input type="checkbox"/> | Change | <input type="checkbox"/> | Addition |
| 1.2 NAME | | | | |
| 1.3 STREET ADDRESS | | | | |
| 1.4 CITY-ST-ZIP | | | | |
| 2.1 TITLE | <input type="checkbox"/> | Change | <input type="checkbox"/> | Addition |
| 2.2 NAME | | | | |
| 2.3 STREET ADDRESS | | | | |
| 2.4 CITY-ST-ZIP | | | | |
| 3.1 TITLE | | | | |
| 3.2 NAME | | | | |
| 3.3 STREET ADDRESS | | | | |
| 3.4 CITY-ST-ZIP | | | | |
| 4.1 TITLE | <input type="checkbox"/> | Change | <input type="checkbox"/> | Addition |
| 4.2 NAME | | | | |
| 4.3 STREET ADDRESS | | | | |
| 4.4 CITY-ST-ZIP | | | | |
| 5.1 TITLE | <input type="checkbox"/> | Change | <input type="checkbox"/> | Addition |
| 5.2 NAME | | | | |
| 5.3 STREET ADDRESS | | | | |
| 5.4 CITY-ST-ZIP | | | | |
| 6.1 TITLE | <input type="checkbox"/> | Change | <input type="checkbox"/> | Addition |
| 6.2 NAME | | | | |
| 6.3 STREET ADDRESS | | | | |
| 6.4 CITY-ST-ZIP | | | | |

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****165.00 ****165.00

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Change

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Addition

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Change

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Addition

14. I do 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.

SIGNATURE: *[Signature]*

71-102 812 3816909

CR2E034 (4/97)

FILED
97 JUL 22 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2012

C. & E. Electronics
6578 Central Ave.
St. Petersburg, FL 33707

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, 32314

July 17, 1997

To whom it may concern:

I just received a second notice package on the Corp. filing packet. To my best recall last year and this year we never received the original one in Jan. If you look at last year date of our payment you will see we paid late and absorbed the late fee without comment even though neither of us remember getting it. But this year we see the late fee is \$385 WOW. After talking to your office they recommend we plead with you for a waiver of the late fee as we feel certain you will understand the plight of small business and the inundated with paperwork.

Your's truly