

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 17 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F61602** (1)
1. Corporation Name
ELECTROTEC (U.S.A.), INC.

Principal Place of Business Mailing Address
2894 ILLIANA COURT 2894 ILLIANA COURT
ORLANDO FL 32808 ORLANDO FL 32808

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **01/12/1982** 3a. Date of Last Report **04/14/1994**
4. FEI Number **59-2200785** 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

2. Principal Place of Business 2a. Mailing Address
21 **661 HAROLD AVENUE** 26 **661 HAROLD AVENUE**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **WINTER PARK, FL** 27 **WINTER PARK, FL**
City & State City & State
23 **32789** 24 **U.S.A.** 25 **32789** 26 **U.S.A.**
Zip Country Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIEFFENTHALER, TREVOR
1918 LAKESIDE DRIVE
ORLANDO FL 32803

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 **Trevor A. Dieffenthaler PRES**

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP**
NAME **DIEFFENTHALER, TREVOR**
STREET ADDRESS **1918 LAKESIDE DR**
CITY - ST - ZIP **ORLANDO, FL 32803**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **V**
NAME **DIEFFENTHALER, FRED A**
STREET ADDRESS **1918 LAKESIDE DR**
CITY - ST - ZIP **ORLANDO, FL 32804**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **VTS**
NAME **DIEFFENTHALER, KAREN**
STREET ADDRESS **1918 LAKESIDE DR**
CITY - ST - ZIP **ORLANDO, FL 32804**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **KAREN DONAHUE**
3.3 STREET ADDRESS **5800 CENTRAL AVE PIKE**
3.4 CITY - ST - ZIP **STEEPLECHASE #2406**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 110.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TA DIEFFENTHALER

04/11/95 407/647 5355