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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Apr 21 1997 8:00am

Secretary of State

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Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F92491

information indicated on this annual report or supplet an an officer or director of the corporation or the appears in Block 12 or Block 13 if changed or on a

SIGNATURÉ

HOME ELECTRONICS OF JACKSONVILLE, INC.

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			% ABDO JOSEPH JOSEPH 6630 BEACH BLVD. STE 4		İ		
JACKSONVILLE FL 32216			JACKSONVILLE FL 32216-2859				
		***************************************			3. Date Incorporated or Qualified	3a. Date of Last F	leport
					07/28/1982	03/20/1996	}
2. Principal Pia	ace of Business	2a. Mailing Address			4. FEI Number		oplied For
1]		26			59-2230285	N	ot Applicable
Suite, Apt #	r, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
2		27			9. Certificate of Status Desired	Fee R	equired
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
3		28			Trust Fund Contribution		to Fees
Zφ	Country	Z _I p	Cour	ntry	8. This corporation has liability for		199.032
4]	25	29	30			Yes No	
	9. Name and Address of C	Surrent Registered Agent			10. Name and Address of New R	egistered Agent	
	Seph, abdo Joseph			81 Name			
663	10 BEACH BLVD, STE 4		ŀ	82 Street Add	iress (P.O. Box Number is Not Accepta	ıble)	
	KSONVILLE FL						
			Ī	83			
			-	24 034		DE 7:0	^i.
				84 City		FL B5 Zip	Code
11. Pursuant t	o the provisions of Sections 60	07.0502 and 607.1508, Florida Stat	utes, the at	oove-named cor	poration submits this statement for the ation's board of directors. I hereby acception	purpose of changing i	ls registered
	п Гатинат with, апо ассерь инс	obligations of Section 607.0505.	Florida Stati	u(8s.			
SIGNATURE	Signature, typed or profed harrie of registr	ered agent and title if applicable (Ne	OTE Registered	I Agent signature requi	uired when reinstating)	DATE	
SIGNATURE	Signature, typed or profed name of regist	ered agent and tice it applicable (N	OTE Registered	l Agent signature requi	uired when reinstating) ADDITIONS/CHANGES TO OFFI		RS IN 12
SIGNATURE		~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~					RS IN 12
SIGNATURE 12. THE	OFFICER	RS AND DIRECTORS	13.	n.e.		CERS AND DIRECTOR	
SIGNATURE 5 12. THE NAME	OFFICEF PSD	RS AND DIRECTORS DELETE	13. 1.1 TH	n.e.		CERS AND DIRECTOR	
SIGNATURE 12. THE NAME SIGNETATIONESS	PSD JOSEPH, ABDO JOSEP	RS AND DIRECTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST	TLE ME		CERS AND DIRECTOR	
SIGNATURE 12. THE NAME SIGHT ADDRESS CHY-ST ZIP	PSD JOSEPH, ABDO JOSEP 6630 BEACH BLVD, STI	RS AND DIRECTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST	FLE ME REET ADDRESS TY-S1-ZIP		CERS AND DIRECTOR	
SIGNATURE 12. THE NAME SIBJE FADORESS CHY-ST ZIP THEF	PSD JOSEPH, ABDO JOSEP 6630 BEACH BLVD, STI	RS AND DIRECTORS DELETE H E 4	13. 1.3 TIS 1.2 NA 1.3 ST 1.4 CB	ILE IME REET ADDRESS ITY-ST-ZIP		CERS AND DIRECTOR	Addition
SIGNATURE 12. THE NAME SIGNET ADDRESS OITY-ST-ZIP THEE NAME	PSD JOSEPH, ABDO JOSEP 6630 BEACH BLVD, STI	RS AND DIRECTORS DELETE H E 4	13. 1.3 TH 1.2 NA 1.3 ST 1.4 CG 2.1 TH 2.2 NA	ILE IME REET ADDRESS ITY-ST-ZIP		CERS AND DIRECTOR	Addition
SIGNATURE 12. THE NAME SHEEF ADDRESS CHY-ST, ZIP THEE NAME STREET ADDRESS	PSD JOSEPH, ABDO JOSEP 6630 BEACH BLVD, STI	RS AND DIRECTORS DELETE H E 4	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.1 TH 2.2 NA	TLE ME REET ADDRESS IY-SI-ZIP LE ME REET ADDRESS		CERS AND DIRECTOR	Addition
SIGNATURE 12. TILE NAME SIBSET ADDRESS CITY- ST. ZIP TITLE NAME SIREET ADDRESS CITY- ST. ZIP	PSD JOSEPH, ABDO JOSEP 6630 BEACH BLVD, STI	RS AND DIRECTORS DELETE H E 4	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.1 TH 2.2 NA	TLE ME REET ADDRESS TY-S1-ZIP LE ME REET ADDRESS TY-S1-ZIP		CERS AND DIRECTOR	Addition
SIGNATURE 12. TILE NAME SIBSE FADORESS COLY ST ZIP TILE NAME STREET ADDRESS COLY ST ZIP TILE TILE NAME STREET ADDRESS COLY ST ZIP TILE	PSD JOSEPH, ABDO JOSEP 6630 BEACH BLVD, STI	AS AND DIRECTORS DELETE H E 4	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CG 2.1 TH 2.2 NA 2.3 ST 2.4 GG	RLE ME REET ADDRESS TY-S1-ZIP LE ME REET ADDRESS TY-S1-ZIP LE ME REET ADDRESS TY-S1-ZIP		CERS AND DIRECTOR Change Change	Addition
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SIGNATURE 12. TILE NAME SIBSE ALORESS CITY-ST ZIP TILE NAME SIBELL ACIPLESS CITY-ST-ZIP TILE NAME NAME	PSD JOSEPH, ABDO JOSEP 6630 BEACH BLVD, STI	AS AND DIRECTORS DELETE H E 4	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CC 2.1 TH 2.2 NA 2.3 ST 2. 4 CH 3.1 TH 3.2 NA 3.3 ST	FLE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP		CERS AND DIRECTOR Change Change	Addition
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