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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Feb 06, 1999 8:00am **Secretary of State**

ļ	1999	DIVISION OF	CORPORATIONS	_	
DOCLI	MENT # F94000	000000		02-06-1999 90029 013 ***15	0.00
1. Corporation		003863			
CUSTON	A ELECTRONICS OF META	IRIE, INC.			
·					
Principal Plac	e of Business	Mailing Address			
4317 AVRON B		4317 AVRON BLVD.		i	
METAIRIE LA 7	0006	METAIRIE LA 70006		DO NOT WRITE IN	THIS SPACE
· .				3. Date Incorporated or Qualifed	
				07/25/1994	
Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 26				72-0709326	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current ye	ar Intangible
24	25	29	30	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Regist	ered Agent
EDE		7. N. A. W. S. C. C.	81 Name		
EDENFIELD, WILLIAM C OUS 1016 DESHAZO ROAD: OF ME 16245, MC			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	CRESTVIEW FL 32539			THE PARTY OF THE PARTY AND THE PARTY OF THE	AND AND HIS WIR HIES HIS SAN
ONEOVIEW C DECOU			83		
		`#	84 City	A A SECTION OF STATE OF CASE OF A	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stati	ites, the above-named cor	poration submits this statement for the purpo ion's board of directors. I hereby accept the	se of changing its registered
office or i	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was actions of, Section 607,0505, Fl	authorized by the corporat orida Statutes.	ion's board of directors. I hereby accept the	appointment as registered
SIGNATURE					·
	Signature, typed or printed name of registered agent and title if applicable. (NOTI			ADDITIONS/CHANGES TO OFFICER	·
12.	OFFICERS A	IND DIRECTORS	13.		☐ Change ☐ Addition
NAME	EDENFIELD, WILLIAM C	:	1.2 NAME	2.333328	- • -
STREET ADDRESS	44.00 11.00 11.00		1.3 STREET ADDRESS		
CITY-ST-ZIP	METAIRIE LA 70006		1,4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	EDENFIELD, WILLIAM J		2.2 NAME	•	
STREET ADDRESS	205 DIANNE PL		2.3 STREET ADDRESS	·	
CITY-\$T-ZIP	ST. ROSE LA 70087	e principal section of the section o	2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE POST	Supportunity	A THE SECTION OF THE DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSTON, JACOB		3.2 NAME		
1 1.330	1112 PASADENA AVE.		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	・ Profession And Training To Table 1997 (All Profession And Parks) (All P	部,知道制、開始制。
TITLE	METAIRIE LA 70006	. DELETE	4,1 TITLE		
ነ	CASTIGLIOLA, FRANK	·. —	4, 2 NAME		• • •
NAME STREET ADDRESS	ALLA DIDENIA DD		4.3 STREET ADDRESS		
CITY-ST-ZIP	MERAUX LA 70075		4.4 CITY-ST-ZIP		
TITLE	· .	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	55	· · ·
STREET ADDRESS	a Darrey a see research	•	5.3 STREET ADDRESS	10 4 550 ft	
	WHEN ET WARF	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Programme to the second	☐ Change ☐ Addition
(m gm/s***	WERE THE		6.2 NAME		
NAME "TAGE	MELLER OF LANDA				•

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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP