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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

## F95000005495 (5) DOCUMENT #

TOC ELECTRONICS, INC.

Principal Place of Business	Mailing Address
111 MINEOLA AVE ROSLYN HEIGHTS NY 11577	111 MINEOLA AVE ROSLYN HEIGHTS NY 11577-1281

## **FILED** May 16 1997 8:00am Secretary of State



111 MINEOLA							
NOSLIN NEW	AVE HTS NY 11577	111 MINEOLA AVE ROSLYN HEIGHTS NY 1	1577-1261				
					3. Date Incorporated or Qualified 11/09/1995	3a. Date of 08/20/	Last Report
2. Principal Fi	ace of Business	2a. Mailing Address			4. FEI Number	.1	Applied Fo
21		26			13-3014754		Not Applic
Suite, Apt	#. etc	Suite, Apt. #, etc.				\$t	3.75 Additions
22		27			5. Certificate of Status Desired		Fee Required
City & State	9	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 has liability for it	ntangible tax u	inder s. 199.03
24]	25	29	30			Yes 🗶 No	
	9. Name and Address of Cur		1551		10. Name and Address of New Re-		
NA'	TIONAL CORPORATE RESEA		81	Name			-
	06 HAYES ST #2						
			82	Street Add	fress (P.O. Box Number Is Not Acceptab	le)	
IA	LLAHASSEE FL 32301		83	<b></b>			·····
			84	City		E 65	Zip Code
					poration submits this statement for the pation's board of directors. I hereby accept		
12.		AND DIRECTORS	13.	an signatura requ	ired when reinstaling) ADDITIONS/CHANGES TO OFFIC		
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			13 SIRFE	ADDRESS RC2	c route. 8 Avenue du l	ÆR MAI	
	91124 PALAISEAU CEDEX	(FR			s route, 8 avenue du l	ER MAI	
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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 12

SIGNATURE: