## 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

DOCUMENT # F9600002917 (0)

BRIGHTPOINT ACQUISITION, INC.

Principal Place of Business

Mailing Address

## FILED Apr 30 1997 8:00am Secretary of State



6402 CORPO INDIANAPOL				6402 CORPORATE DR. INDIANAPOLIS IN 46278-2913								
								3. Date Incorporated or Qualified 06/11/1996	3a. Date	of Last	Report	
2. Principal	Place of Busin	ness	2a. Mailing Add	2a. Mailing Address				4. FEI Number	······		Applied For	
21			26	26				35-1778566 Not Applicable			9	
Suite, Apt. #, etc.			<u> </u>	Suile, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State				City & State			6. Election Campaign Financing \$5.00 May Be					
23			28					Trust Fund Contribution Added to Fees				
Zip	<b>Zip</b> Country			Zip Country			6. This corporation has liability for intalligible tax differ 5. 150.002					
24		25	29					Florida Statutes Yes No				
			rent Registered Agent					10. Name and Address of New Re	gistered Aç	jent		
		E-HALL CORPORATI	ION SYSTEM, INC.		[ ]	B1	Name					ļ
	01 HAYS ST						Street Address (P.O. Box Number is Not Acceptable)					
TA	<b>LLAHASSEE</b>	FL 32301					·					4
												ļ
					Ī	84	City		FL	85 Zi	o Code	_
41 Durena	nt to the provis	ions of Sections 607 (	1502 and 607 1508 Flor	ida Statut	ne tho ah		named co	prporation submits this statement for the p		hanging	ite registeres	;
office o	r registered ac	aent, or both, in the Sta	ate of Fiorida. Such chai	nge was a	authorized	l by t	the corpor	ation's board of directors. I hereby accep	ot the appoi	ntment a	is registered	
		ith, and accept the ob	ligations of, Section 607	.0505, 140	nda Statu	лes.						ļ
SIGNATURI	Signature, typed	or printed harm, of tog stored	agent and tale 1 applicable	(NOT)	: Registered	Agent	t signature rec	quireo when reinstating)	DATE			
12,	v		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND D	DIRECTO	DRS IN 12	$\exists_i$
TITLE	DP			ELETE	1.1 101	Lŧ				Change	Addition	1 8
NAME	LAKIN, I	ROBERT J			1.2 NAI	Μ[	1					
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CITY-ST-ZIP TITLE	<del></del>	<del></del>		ELETE	5.4 Cil 6.1 Till		· ZII'			Change	Addition	$\vdash$
NAME			ں ب		6.2 NAI					- Change		
STREET ADDRES							DORESS					
CITY-ST-ZIP	<b>"</b>				6.4 CIT		4					-
	reby certify the	the information supri	lied with this fiting does	not qualif				ed in Section 119.07(3)(i), Florida Statute	s. I further o	erlify the	at the	$\dashv$

am an officer or director of the corporation or the receiver in trustee corporated to execute this report as required by Chapter 607, Florida Stalutes; and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed, or has a characteristic and that my name appears in Block 12 or Block 13 if changed in Block 13 if changed in Block 12 or Block 13 if changed in Block 13 if changed in Block 12 or Block 13 if changed in Block 13 if c

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