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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Jan 20 1998 8:00am Secretary of State

FILED

	MENT # F96000 ECH ELECTRONICS, CORP.	004364 (3)						
B								
Principal Place		Mailing Address						
381 ROBERTS OLDSMAR FL		1008 industrial dr Unit J			,			
US	. 040.7	W BERLIN NJ 08091			DO NOT WRITE IN TH	IIS SPACE		
		US			3. Date Incorporated or Qualified			7
					08/26/1996			
2. Principal P	lace of Business	2a. Mailing Address		D	4. FEI Number		Applied For]
21			<u>ects</u>	KOAD	22-2855253		Not Applicable	<u>;</u>
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Regulred		
City & State	<u> </u>	City_& State						-
23	G	28 Oldsman	2		6. Election Campaign Financing Trust Fund Contribution		May Be	
Zip	Country	Zip ~ 34677	Cour	ntry	8. This corporation owes or has paid the			┨
24	25			AŻL	Personal Property Tax due June 30.		□ No	ļ
	9. Name and Address of Current				10. Name and Address of New Register	ed Agent		j
WC	DLLETT, FRANKLYN J ESQ		j	81 Name				
2790 SUNSET POINT RD			}	82 Street Addre	ess (P.O. Box Number is Not Acceptable)			\dashv
CLI	EARWATER FL 34619			-	(i.e. sex realise is new respective)			
				83				7
			ŀ	84 City		85 Zip	Code	┥
			ĺ					╛
11. Pursuant office or reagent. La	to the provisions of Sections 607.0502 egistered agent, or both, in the State of im familiar with, and accept the obligat	and 607.1508, Florida Statute of Florida. Such change was a ions of, Section 607.0505, Flo	es, the ab uthorized rida Stati	oove-named corporation to the corporation utes.	oration submits this statement for the purposion's board of directors. I hereby accept the a	e of changing appointment a	its registered s registered	
SIGNATURE	, -						٠.,	1
	Signature, typed or printed name of registered agent			Agent signature require				-16
12. 717LE	OFFICERS AND	DELETE	13, 1,1 iii	15	ADDITIONS/CHANGES TO OFFICERS A	Change		45
NAME	DEMARCO, DAVID	0	1.2 NA			onlinge	Addition] =
STREET ADDRESS	4412 WHEATLAND WAY			REET ADDRESS				8
CITY-ST-ZIP	PALM HARBOR FL			Y-ST-ZIP				12
TITLE		DELETE	2.1 []]			Change	Addition	15
NAME			2.2 NA	ME				
STREET ADDRESS			2.3 ST	REET ADDRESS				1
CITY-ST-ZIP			1	TY-ST-ZIP				
TITLE		DELETE	3.1 TIT			Change	Addition	٦
Name	1		3.2 NA	ME				ĺ
STREET ADDRESS			3.3 STF	REET ADDRESS				
Citty - ST - ZIP			_	TY-ST-ZIP	<u> </u>			
TITLE		☐ DELETE	4.1 TIT	LE			Addition	1
NAME			4. 2 NA					
STREET ADDRESS				REET ADDRESS				
CITY - ST - ZIP		Libring		Y-ST-ZIP		Obar	Addisi'	-
TITLE		☐ DELETE	5.1 TIT			Change	Addition	
NAME			5.2 NA	ŀ				
STREET ADDRESS				REET ADDRÉSS				1
CITY-ST-ZIP		☐ DELETE		Y-ST-ZIP		Change	Addition	-
TITLE		Deceie	6.1 TIT	į.		L_1 Griange	ET MORROR	
NAME CYNCET ADDRESS			•	J				
STREET ADDRESS			0.5 511	REET ADDRESS				

14. I hereby certify that the information supplied with this filing does not indicated on this annual report or supplemental agrual report is true officer or director of the corporation or the receipt or trustee emog Block 12 or Block 13 if changed, or on an attachment with an acceptance.

SIGNATURE:

