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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000001295 (1)

THE MATCO ELECTRONICS GROUP, INC.

Principal Place of Business 320 N. JENSEN ROAD

Mailing Address

320 N. JENSEN ROAD VESTAL NY 13850 VESTAL NY 13850

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 16-1514315 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Country Zip Zip Cauntry 8. This corporation owes or has paid the current year Intangible 25 29 24 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent DAVIS, LAWRENCE E **12175 NW 39TH STREET** Street Address (P.O. Box Number is Not Acceptable) CORAL SPRINGS FL 33065 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PCD TITLE DELETE 1.1 TITLE ☐ Change MATTHEWS, JAMES F NAME 1.2 NAME 25034 7 DELLWOOD PLACE STREET ADDRESS 1.3 STREET ADDRESS **BINGHAMTON NY 13903** 1.4 CITY - ST - ZIP CITY-ST-ZIF TSD ☐ DELETE Change Addition 2.1 TITLE TITL F DAVIS, LAWRENCE E 2.2 NAME NAME 1320 HILLSIDE DRIVE STREET ADDRESS 2.3 STREET ADDRESS VESTAL NY 11385 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TH F NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE 5.1 TITLE Change Addition Addition TITLE MAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ___ Change Addition TITLE 6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

NAME

STREET ADDRESS.

CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 eceiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of gather an additional statutes. 107-74-l973