## 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 # G11338

INTERSTATE CIRCUIT PRODUCTS, CO.

2)	

## **FILED** Jun 05 1997 8:00am Secretary of State



Principal Place	e of Business		M	lading Address			( ''''					
8040 BW 10 ST POMPANO BEACH FL 33089 US		3040 SW 10 ST POMPANO BEACH FL 33069-4813 US										
								Table 1			te of Last Report 2/1996	
	lace of Busines		2a.	Mailing Address			4. FEI N				Applied For	
21 273	1 N.W. 20	O THAVE .	26	A73/ N.U	V. BOTT	AVE.	59-2	2202410			ot Applicable	
Sulte, Apt.	#, etc.			Suite, Apt. #, etc.			E Codifi	note of Clotus Desired	X	\$8.75	Additional	
22			27				b. Ceruii	cate of Status Desired		Fee F	Required	
City & State				City & State		1	6. Electio	on Campaign Financing		\$5.00	May Be	
23 FOAT L	MORRONI	e . Fl	28	FORTLANDE	KDA/E	. Fl	Trust I	und Contribution		Added	to Fees	
. Zip	. L	Country		Ζip	Co	untry	8. This c	orporation has liability for	intangible	tax under	s. 199.032,	
24 333/	// 25	USA	29	3331/	30	USA	Florida	a Statutes	▼ Yes [	] No		
	9, Name an	d Address of Cu	rrent Regis	stered Agent			10, Name	and Address of New Re	gistered A	gent		
DUD	ira, stephen	4 J				81 Name	Dunga	C-moured 4				
2624	MARATHON	LANE				82 Street	Address (P.O. Br	STEPHEN 7. Number is Not Acceptal W. 30 M/V	hle)			
	LAUDERDALE					OL OHOCK	2731 N	W. 30TH AU				
	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					63						
1												
Ţ.						84 City	PORTLAUDE	ende	FL	85 Zip	Code	
11. Pursuant t	to the provision	s of Sections 607	.0502 and 6	307.1508. Florida St	talutes, the a	bove-named	corporation subm	its this statement for the	nurnose of	changing	its registered	
office or re	egistered agent	t, or both, in the S	State of Flori	ida. Such change w	vas authorize	ed by the corp	poration's board o	f directors. I hereby acce	pt the app	ointment a	s registered	
, · · · · ·	ırı ramınar wım,	and coop the	ibligations's	i, Section 607.0505				4.4		100	_	
SIGNATURE	Signature types or	ritle Itame of regist	od accol and tite	n if anni-cable	NOTE Register	J. W	required when reinstating	<u></u>	AY Z	144/		
12.	Old rate of types or t		AND DIRE		13.	or igo k organism		ONS/CHANGES TO OFFI	CERS AND	DIRECTO	RS IN 12	
TITLE	PD			DELETE		ITLE	TD			Change	Addition	
NAME	DUDRA, MA	RCIA A		<del></del>	1.2 M	IAAAF	DUDRA . M	ARCIA A.		·		
STREET ADDRESS	2624 MARA					TREE1 ADDRESS	91911 184	RATION LANE				
CITY-ST-ZIP	FT. LAUDEF					ITY-S1-ZIP	ET LAINE	4-1/4 El 33	7/4			
TITLE	TD			DELETE			PSD	MANIE, Fl. 33	<i>}   }</i>	Change	Addition	
NAME	DUDRA, STI	EDHEN I			221		DUDEN, ST	emeral A.		Change		
•		THON LANE					טייין, אייין	THE LAND				
STREET ADDRESS	FT. LAUDER				3	TREET ADDRESS	26247410	THON CAME NAME, Fl. 333	- 1 4			
CITY-ST-ZIP	ri. LAUDER	IDALE FL		DELFTE		CITY-ST-ZIP	FT. LAUDE	NAIR, 171, 553	12	Change	Addition	
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NAME	1				3.2 N		1					
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NAME					6.2 1	IAME						
STREET ADDRESS						TREE1 ADDRESS						
CITY-ST-ZIP						:17Y+\$1+7IP	}					
	by certify that th	e information sur	unlied with t	his filing does not a			tated in Section 1	19 07/3\/ii). Florida Statute	e Lfurther	cortify the	et the	

I have a supposed from the mornial of supposed with this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.