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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 18 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G43641** **(1)**

1. Corporation Name
CAN-AMERICAN ELECTRONICS CORPORATION

Principal Place of Business	Mailing Address
7234 TAFF ST. HOLLYWOOD FL 33024	7234 TAFF ST. HOLLYWOOD FL 33024

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/14/1983**
3a. Date of Last Report: **04/05/1994**

2. Principal Place of Business	2a. Mailing Address
21 6191 ORANGE DRIVE	26 7350 NW 1ST CT
22 Suite, Apt. #, etc: 6165H	27 Suite, Apt. #, etc:
23 City & State: DAVIE, FL	28 PEMBROKE PINES
24 Zip: 33314 25 County: BROWARD	29 Zip: 33024-7211 30 County: BROWARD

4. FEI Number: **59-1576434** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible taxes under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WILLIAMSON, ROBERT D. 7234 TAFT ST. HOLLYWOOD FL 33024	81 Name: ROBERT WILLIAMSON 82 Street Address (P.O. Box Number is Not Acceptable): 7350 NW 1ST CT 83: PEMBROKE PINES 84 City: FL 85 Zip Code: 33024

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: Robert D Williamson 4/12/95
(Typed or printed name of registered agent and the date signed) (Registered Agent's signature required where applicable) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	DP ☒ Change ☐ Addition
NAME	WILLIAMSON, ROBERT D.	12 NAME	ROBERT D. WILLIAMSON
STREET ADDRESS	7234 TAFT ST	13 STREET ADDRESS	7350 N.W. 1ST CT
CITY ST ZIP	HOLLYWOOD, FL 0	14 CITY ST ZIP	PEMBROKE PINES, FL 33024
TITLE	VP	21 TITLE	VP ☒ Change ☐ Addition
NAME	WILLIAMSON, HELEN C.	22 NAME	HELEN C. WILLIAMSON
STREET ADDRESS	7234 TAFT ST	23 STREET ADDRESS	7350 N.W. FIRST CT.
CITY ST ZIP	HOLLYWOOD FL	24 CITY ST ZIP	PEMBROKE PINES, FL 33024
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 13 if changed, or on an attachment with an address.

SIGNATURE: Robert D Williamson 4/12/95 (305)466-4676
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000682 CP