## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION -

ANNUAL REPORT



Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # G62189 (7)							
1. Corporation Name  ELECT TEL INDUSTRIES INC.							
Principal Place	of Business	Mailing Address	ailing Address			II BIAIR BIAR BIBII GIBII AFBII DIEIL ROBE	
2200 SW 71ST TERR		2200 SW 71ST TERR					
B-5 DAVIE FL 33317		B-5 Davie Fl 33317			<del> </del>		
•	•	D			3. Date Incorporated or Qualified : 09/02/1983	3a. Date of Last Report 04/17/1995	
Principal Place of Business 2a.		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21 2		26	26		59-2321559	Not Applicable	
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, etc.	Suite, 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	
Ζίρ			Country		8. This corporation has liability for intangible tax under s 199.032,  Florida Statutes   ✓ Yes   No		
24	9. Name and Address of Curre	29 ent Registered Agent	30		10. Name and Address of New Reg		
			81	Name			
PARDEE, JAMES A. 3999 LANSING AVE			82	Street Add	eet Address (P.O. Box Number is Not Acceptable)		
			83				
COOPER	R CITY FL 33026						
			84	- /		FL 85 Zip Code	
11. Pursuant to	o the provisions of Sections 607.050	02 and 607.1508, Florada Statute	es, the above r	named corpor	ration submits this statement for the purpord of directors. I hereby accept the appoin	se of changing its registered office	
familiar wit	h, and accept the obligations of, Sec	ction 607.0505, Florida Statutes	ed by the corp.	oration's poa	rd of directors. Thereby accept the appoint	iment as registered agent. Fam	
SIGNATURE _	Signature, typed or printed name of registered age	or see tole it should able 400	TE Registered Agen	d soon done not not	all agrees in and stays.	ΓιΔΤ'r	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	<b>D</b> DEL		1 1 TITLE			☐ Change ☐ Addition	
NAMÉ	PARDEE, JAMES A.		1.2 NAME				
STREET ADDRESS	3999 LANSING AVE.		1.3 SIREE!				
CITY-ST-ZIP TITLE	VD COOPER CITY FL	☐ DELETE	1.4 CHY-S1-ZIP 2.1 TILLE			Change Addition	
NAME	ROSE, HARRY M.		2 2 NAMÉ				
STREET ADDRESS	2115 SW 97TH LN.		2 3 STREET	ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		2 4 CITY - ST - ZIP				
TITLE	☐ DELETE		3 1 TITLE			Change Addition	
NAME			3.2 NAME	<b>■</b>			
STREET ADDRESS			33 STREET				
CITY-ST-ZIP TITLE	DELETE		3.4 C/TY - S 4.1 TiTLE	I - ZIP		Change Addition	
NAME	steen		4.2 NAME		المراوات المساورة والمساورة والمساورة والمساورة والمساورة		
STREET ADDRESS			4.3 STREET	ADDRESS	30000175 93/25/960104	E3L1E321	
C(TY-ST-ZIP			4.4 CiTY - S	i7 - ZiP	*** <u>203.80</u>	107-012	
TITLE			5 1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			53 STREET	ADDRESS			
CITY-SI-ZIP			5.4 CHY - S	IT-ZIP	··		
TITLE			6 1 TITLE		☐ Change ☐ Addition		
NAME proces appaces			6.2 NAME	ADDDECC			
STREET ADDRESS			6 3 STREET 6 4 CITY - S				
CITY-ST-ZIP 14. I do hereb	I y certify that the information supplied	d with this filing is voluntarily furn			for the exemption stated in Section 119.07	(3)(k), Florida Statutes. I further	

octify that the information indicated on this annual report of 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 other or director of the corporation or the required on the corporation or the required to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed wor an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR