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

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H65992

(0)

ELECIF	KONIC ASSEMBLY SUPPL	Y CO., INC.				
Principal Place	e of Business	Mailing Address				JOHN DIDIN BIDIN DIDIN DUKIN BUKIN FORN
2262 VINA DEL MAR WEST		2262 VINA DEL MA	2262 VINA DEL MAR WEST			
ST. PETERSBURG BEACH FL 33706		ST. PETERSBURG BEACH FL 33706			DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified	
					07/11/1985	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2570684	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			5. Commedia of States Busines	Fee Required
City & State		City & State	- Pop 1		6. Election Campaign Financing	\$5.00 May Be
Zip Country		[28]	Zip Country		Trust Fund Contribution	Added to Fees
24	25	herry in the second	⊢	ıı y	 This corporation owes or has paid the Personal Property Tax due June 30. 	current year Intangible ■ Yes
24	g. Name and Address of Curre	29 ent Registered Agent	30		10. Name and Address of New Registers	
PΩ	TH, JOHN C.			1 Name		
	32 VINA DEL MAR WEST					
ST PETERSBURG FL 33706			18	2 Street A	ddress (P.O. Box Number is Not Acceptable)	
0,	TETERODORIA TE 00700		8	3		
			8	4 City	F	85 Zip Code
11, Pursuant t	to the provisions of Sections 607 05	502 and 607.1508, Florida	I Statutes, the abo	ve-named c		
office or re agent. Las	egistered agent, or both, in the Stat m familiar with, and accept the oblic	te of Florida. Such change idations of, Section 607.050	was authorized 35. Florida Statu	by the corpo es.	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE		3	,			
	Signatore typed or printed name of registered as	agent and title it as plicable	(NCITE Begistered /	sgent signature r	equired when reinstating) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSD	☐ DELET	E 1.1700	•		Change Addition
NAME	ROTH, JOHN C.		1.2 NAM			
STREET ADDRESS 2262 VINA DEL MAR WESTT		1.3 STRE	FT ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL			-ST-ZIP		Пон Падиг
TITLE		[_] DELET	i - · · ·			Change Addition
NAME			2.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE		DELET		'-S1-7(P	AND	Change Addition
NAME		L VIIII)	3.2 NAM			C comings C variable
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP				-SI-ZIP		
TITLE		DELET				☐ Change ☐ Addition
NAMÉ			4. 2 NAN			_ , _
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP				- ST - ZIP		
TITLE		DELET				☐ Change ☐ Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 C/TY	- S1 - ZIP		
TITLE		DELET	E 6.1 THE			Change Addition
NAME			6.2 NAM	f		
STREET ADDRESS			6.3 STRE	E1 ADDRESS		
0077 07 760			64600	C1 71D		

14. Thereby certify that the information supplied with this filing 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 drip lemental 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 of 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 adactimory with any didress

FILED

Apr 21 1998 8:00am

Secretary of State