FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation Name

H66227 **DOCUMENT #**

(0)

INDUSTRIAL CONTROL ELECTRONICS CORPORATION Principal Place of Business Mailing Address														
			Mailing Address										'	
1021 S. ROG STE 7	1021 S. ROGERS CIR. Ste. 7													
BOCA RATON FL 33487 US		Ē	BOCA RATON FL 33487 US				3. Date Incorporated or Qualified 3a. Date of Last Report 07/15/1985 05/01/1995			•				
2. Principal Pla	ace of Business	2a.	Mailing Address					07/15/1985 4. FEI Number		<u> </u>	או קו טקכ			
21			26					59-2563501				Applied For Not Applicat	blo	
Suite, Apt. #, etc.			Suite, Apt. #, etc.								\$9.7	5 Additional		
22			27					5. Certificate of Status	Desired			Required		
City & State			City & State					6. Election Campaign F	inancing		\$5.0	00 May Be		
23			28					Trust Fund Contribut	ion			ed to Fees		
Zip	Country		Zip Cou				8. This corporation has liab				ax under s	s 199.032,		
24	25 25 9. Name and Address of Current		29 30		T			Florida Statutes Yes No			·			
	9. Name and Address of Curre	nt Regis	tered Agent		81	Name		10. Name and Address	of New R	egistered	Agent			
O IDDIN	ANTHONIV				"	Nank	3							
DURBIN, ANTHONY						Stree	t Addres	ss (P.O. Box Number is No	t Acceptabl	le)				
22464 MIDDLETOWN DRIVE BOCA RATON FL 33428					63	ļ		· · · · · · · · · · · · · · · · · · ·						
BOUA N	NION FL 33428				~									
					84	City				FL	85 2	ip Code		
or registere	o the provisions of Sections 607.050 ad agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida Such	i coange was authorize	ed by the i	Ll ove-r corpa	named oration'	corporat s board	tion submits this statement of directors. I hereby acce	for the purp opt the appo	occo of ob	anging its registere	registered of d agent. I am	fice I	
	Signature, typed or printed name of registered ager	t and the La	ippi cable INOT	TE: Registered	i Agen	11 signature	required v	when reinstating:		DATE				
12.	OFFICERS AN	ID DIREC		13.				ADDITIONS/CHANGI	ES TO OFFI	CERS AND	DIRECT	ORS IN 12		
TITLE	P		☐ DELETE	1.1 T	TLE					[Change	Additio	n	
NAME	DURBIN, ANTHONY				AME								İ	
STREET ADDRESS	22464 MIDDLETOWN DRIVE			1.3 \$	TREET	ADDRESS	•							
CITY-ST-ZIP	BOCA RATON FL				1.4 CITY - ST - ZIP									
TITLE	ST PARCONAL MELICON		☐ DELETE		2. 1 TITLE					Į	_ Change	Additio	n	
NAME	DURBIN, MELISSA					2.2 NAME								
STREET ADDRESS	22464 MIDDLETOWN DRIVE					ADORESS								
CITY-ST-ZIP TITLE	BOCA RATON FL		DELETE		ITY - S	T-ZIP					- ••••••	A 1 200		
NAME			Dereie	3. 1 T						ı	Change	Addition	n	
STREET ADDRESS				3.2 N		. soppeor								
CITY-ST-ZIP						ADDRESS	3							
TITLE			☐ DELETE	4 1 T	ITY - ST	1-214	 				Change	☐ Addition		
NAME			— - ·	42 N								L. Addition	"]	
STREET ADDRESS						ADDRESS							1	
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TITLE			☐ DELETE	5 1 1		,				[Change	Addition	<u>_</u>	
NAME				5 2 N	AME					_				
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CITY-ST-ZIP					TY-\$1									
TITLE			☐ DELETE	6 1 7							Change	Addition	n	
NAME				6.2 N	AME									
STREET ADDRESS				6.3 S	REET	ADDRESS								
CITY-ST-ZIP	7.11			6 4 C	TY·SI	r · zip	\perp						l	

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)(k), 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: __

SIGNATURE AND TYPED OR THE DE NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96 407-241-0235