

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H71246** (3)

1. Corporation Name

ENA TECHNOLOGY, INC.



Principal Place of Business

Mailing Address

**3215 N.W. 10TH TERR. #201
FT. LAUDERDALE FL 33309**

**3215 N.W. 10TH TERR. #201
FT. LAUDERDALE FL 33309**

2. Principal Place of Business

2a. Mailing Address

21 **1999 UNIVERSITY DR**

26 **1999 UNIVERSITY DR**

Suite, Apt. #, etc

Suite, Apt. #, etc.

22 **214**

27 **214**

City & State

City & State

23 **CORAL SPRINGS, FL**

28 **CORAL SPRINGS, FL**

Zip

Zip

Country

Country

24 **33071**

25 **US**

29 **33071**

30 **US**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAKAYA, HELIO

**3215 N.W. 10TH TERR. #201
FT. LAUDERDALE FL 33309**

81 Name

SAKAYA, HELIO

82 Street Address (P.O. Box Number is Not Acceptable)

1999 UNIVERSITY DRIVE

83

SUITE 214

84 City

CORAL SPRINGS FL

85 Zip Code

33071

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

HELIO SAKAYA MT

5/3/96

(Signature of person named as registered agent or director of the corporation)

(Signature of Registered Agent or signatory representative)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **DE CARVALHO, ALEXANDRE**
STREET ADDRESS **3215 NW 10TH TERR.**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE **VPD** ☐ DELETE
NAME **DE LAROSA, JOSE**
STREET ADDRESS **3215 N.W. 10TH TERR.**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE **MT** ☐ DELETE
NAME **SAKAYA, HELIO**
STREET ADDRESS **3215 NW 10TH TERR**
CITY-STATE-ZIP **FT LAUDERDALE FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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)(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 I am signed, or on an attachment with an address.

SIGNATURE:

[Signature]

HELIO SAKAYA, MT

5/3/96 854-796-1003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Day/Mo/Yr

CR2E034 (12/95)