

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

FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H79875 (1)

1. Corporation Name
MAGNUM IGNITION PRODUCTS, INC.



Principal Place of Business 4359 PETERS ROAD PLANTATION FL 33317-4542 US	Mailing Address 4359 PETERS ROAD PLANTATION FL 33317-4542 US
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 10/08/1985	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-2671537	Applied For Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	28 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

**MEISLER, SMITH PA
 10211 W SAMPLE RD 212
 CORAL SPRINGS FL 33085**

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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 _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WISE, ARTHUR	1.2 NAME
STREET ADDRESS	4359 PETERS ROAD	1.3 STREET ADDRESS
CITY-ST-ZIP	PLANTATION FL	1.4 CITY-ST-ZIP
TITLE	T <input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WISE, MARION	2.2 NAME
STREET ADDRESS	4359 PETERS ROAD	2.3 STREET ADDRESS
CITY-ST-ZIP	PLANTATION FL	2.4 CITY-ST-ZIP
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REITER, BONNIE	3.2 NAME
STREET ADDRESS	4359 PETERS ROAD	3.3 STREET ADDRESS
CITY-ST-ZIP	PLANTATION FL	3.4 CITY-ST-ZIP
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REITER, SCOTT	4.2 NAME
STREET ADDRESS	4359 PETERS ROAD	4.3 STREET ADDRESS
CITY-ST-ZIP	PLANTATION FL	4.4 CITY-ST-ZIP
TITLE	VD <input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRUSKIN, MARC	5.2 NAME
STREET ADDRESS	4359 PETERS ROAD	5.3 STREET ADDRESS
CITY-ST-ZIP	PLANTATION FL	5.4 CITY-ST-ZIP
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRUSKIN, JOAN	6.2 NAME
STREET ADDRESS	4359 PETERS ROAD	6.3 STREET ADDRESS
CITY-ST-ZIP	PLANTATION FL	6.4 CITY-ST-ZIP

14. I do hereby 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 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 of this report, or on any attachment with an address.

SIGNATURE: *Arthur Wise* **ARTHUR WISE** 4/17/97 (954) 581-8158

CR2E034 (9/96)