Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90014 032 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # H87053**

1. Corporation Name

MALWIN ELECTRONICS CORP.

Principal Place	e of Business		Mailing Address	Mailing Address									
THK BUSINESS	PARK	106 COMMERCE WY	06 COMMERCE WY										
	ECHOBEE RD., ST	E. 3H	SUITE B1					DO NOT WRITE IN THIS SPACE					
W. PALM BCH. US	FL 33409		JUPITER FL 33458 US	JUPITER FL 33458				3. Date Incorporated or Qualifed					
03			03					٥.	11/26/1985				
2 Principal P	lace of Business		2a. Mailing Address					4.	FEI Number		An	plied For	
		141.	<u></u>						59-2635751	-	_+	t Applicable	
21 /66 C Suite, Apt.	ommerce.	WAT		Suite, Apt. #, etc.						\$8		Additional	
— · · · · ·			— · · · ·	27				5.	Certifcate of Status Desired		ee Re		
<i>تا نگ</i> City & Stat	re Bl			City & State				6. Election Campaign Financing S5.00 May Be					
عام ن (	٧.		<u></u>	28					Trust Fund Contribution			o Fees	
Zip		Country		Zip Country				-	This corporation owes the current year Inta	ngible	 )		
3343		υS	— ·	29 30				Ŭ.	Personal Property Tax.	ŬYe		□No	
24) 05.14			rent Registered Agent	1001	T			10.	Name and Address of New Registered	gent			
	0. //4				81	Na	me						
HAP, JEFFREY ESQ 341 W INDIANTOWN RD					82		Charat Address (D.O. Boy Number is Not Assentable)						
					02	5111	Street Address (P.O. Box Number is Not Acceptable)						
6390 INDIANTOWN ROAD												-	
JUPI	TER FL 33458									100	7:- (	2-40	
					84	City	4		FL	85	Zip C	ooe	
11 Pursuant	to the provisions	of Sections 607.0	502 and 607.1508. Florida Sta	tutes, the a	bove	ı e-nan	ned corpor	ation	n submits this statement for the purpose of o	chang	ing its	registered	
office or t	egistered agent ic	or both in the Sta	ite of Florida. Such change was	s autnorize:	' עס נ	tne c	orporation	s bo	oard of directors. I hereby accept the appoin	tment	as reç	gistered	
agent. 1 a	m familiar with, ar	id accept the obii	igations of, Section 607.0505,	Flonda Stat	utes.								
SIGNATURE	Standard typed or prin	ted name of registered (	agent and title if applicable. (NO	OTE Registered	1 Agen	nt signa	ture required v	vhen re	reinstating) DATE				
12.	Signature, types or p		AND DIRECTORS	13.			·		ADDITIONS/CHANGES TO OFFICERS AN	D DIF	ECTO		
TITLE	PCEO		☐ DELETE	1.1 ⊤	TLE					C	hange	Addition	
NAME	WEBER, GIFF	ord a.		12 N	AME							j	
STREET ADDRESS	3822 LONGVI			1.3 \$7			ESS						
CITY-ST-ZIP	JUPITER FL	200		1.4 CI									
TITLE	STD		☐ DELETE	2.1 T						□cı	nange	☐ Addition	
NAME	WEBER, BERN	NADETTE M		2.2 N									
STREET ADDRESS	3822 LONGVI			2.3 \$7			ESS						
	JUPITER FL	LW COOM		2.40									
CITY-ST-ZIP TITLE	VPD		☐ DELETÉ	3.1 T				_		C	nange	Addition	
NAME	JOHN R WAG	NED		3.2 N									
	304 WILSON			1		T ADDR	ESS					Ì	
STREET ADDRESS	SADDLE BRO			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP									
CITY-ST-ZIP	SAUDLE BRO	UK 143	☐ DELETE	4.1 T		11-21F			11.0	□c	hange	Addition	
					IAME								
NAME						r addr	E00						
STREET ADDRESS					TY-S1		233						
CITY-ST-ZIP			☐ DELETE	4.4 C		1-212				□ ci	hange	Addition	
TITLE				5.1 N							•	_	
NAME						r addr	EGG						
STREET ADDRESS					ITY-S1								
CITY-ST-ZIP			☐ DELETE	6.1 T		1-412					hange	Addition	
TITLE			□ DELETE								ia igo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
NIANIC	i			6.2 N	MAIL		1						

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS