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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # H88540 (0)
1. COMPONENT RESOURCES INTERNATIONAL CORPORATION

**FILED** Jan 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						-{	
PALM BEACH	PALM WAY, STE 200	PALM BEACH FL 33480	4400 ROYAL PALM WAY. STE 200 PALM BEACH FL 33480			DO NOT WRITE IN THIS SPACE	
US		US				3. Date Incorporated or Qualified 12/06/1985	
· ·	lace of Business	2a. Mailing Address	•			4. FEI Number Applied For	
21		26				22-2663683 Not Applicable	e
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required	
City & Stat	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution	_
Zip	Country 25	Zip	Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	ĺ
24	9. Name and Address of Cur	, ,	30			Personal Property Tax due June 30. Yes X No  10, Name and Address of New Registered Agent	
CHOPIN, L. FRANK					Name		ᅱ
441	ROYAL PALM WAY, STE 20	0	<b>82</b> St		Street Addres	et Address (P.O. Box Number is Not Acceptable)	
PA	LM BEACH FL 33480		83				-
			84	3	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 little if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE							
12.		AND DIRECTORS	13.	<b>J</b> UIN	t organization required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	$\dashv$
TITLE	PSD	DELETE	1,1 TITLE			Change Addition	ī
NAME	SHELBY, JEROME		1.2 NAME				ı
STREET ADDRESS	100 MAIDEN LN.		1.3 STREE	T A	DORESS		
CITY-ST-ZIP			1,4 CITY-	1.4 CITY-ST-ZIP			
TITLE	A STANCE TOWNS	DELETE	2.1 TITLE			Li Change Li Addition	ì
NAME	POLIVY, IRWIN 641 LEXINGTON AVENUE		2.2 NAME				
STREET ADDRESS	NEW YORK NY			2.3 STREET ADDRESS		· · · · · ·	
CATY-ST-ZIP	INCH TOTAL IN	DELETE	2. 4 CITY - 3.1 TITLE		-ZiP	Change Addition	$\vdash$
NAME		L. Beerle	3.1 HILE 3.2 NAME			E Charge E Addition	'
STREET ADDRESS			3.3 STREE		popree		-1
CITY-ST-ZIP			3.4. CITY-				ı
TITLE		☐ DELETE	4.1 TITLE	-31-	-217	☐ Change ☐ Addition	╗
NAME			4, 2 NAME			· · · · · · · · · · · · · · · · · · ·	-
STREET AODRESS			4.3 STREE	T AU	DORESS		
CITY-ST-ZIP			4,4 CJTY-1	ST-	ZIP		-
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition	٦
NAME			5.2 NAME		[		-
STREET ADDRESS			5.3 STREE	T AL	DORESS		-
CITY-ST-ZIP			5.4 CITY - :	ST-	ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE				
CITY-ST-ZIP	artify that the information expedies	with this filling does not qualify for	6.4 CITY-5			ection 110 07/3/() Florida Statutae I further earlify that the information	4
INDIEDAC	crary that the information supplied	mar area ming does not quality it	" " " CVC!!!	2010	stated iii 30	ection 119.07(3)(i), Florida Statutes. I further certify that the Information	- 1

corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in thanged, or op an attachment with an address.