2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H98705

Entity Name: ELEKTRON SYSTEMS, INC.

4027 ALABAMA AVE NE

City-St-Zip: ST PETERSBURG, FL

Address:

FILED Feb 01, 2002 8:00 AM Secretary of State

Current P	rincipal Place	of Bus	iness:		New Principal Plac	e of Busine	ess:
SUITE 202	LL ISLE BLVD. 2 8SBURG, FL 3	3704	US		1355 SNELL ISLE BI SUITE 202 ST PETERSBURG,		US
Current M	ailing Addres	s:			New Mailing Addre	ess:	
SUITE 202	LL ISLE BLVD. ? RSBURG, FL :	33704	US		1355 SNELL ISLE BI SUITE 202 ST. PETERSBURG,		US
FEI Number:	: 59-2634655	FEI Nu	ımber Applied For()	FEI Nur	nber Not Applicable ()	Certific	cate of Status Desired ()
Name and	Address of C	urrent	Registered Agent:		Name and Address	of New Re	gistered Agent:
	MICHELE BAMA AVENUE SSBURG, FL 3		THEAST US		MALEK, D. MICHEL 4027 ALABAMA AVE ST.PETERSBURG,	E. NE	US
	named entity s e of Florida.	submits	this statement for the p	ourpose o	of changing its register	red office or	registered agent, or both,
SIGNATUR	RE: D. MICHE	ELE MAI	_EK				02/01/2002
	Electron	ic Signa	ature of Registered Ag	ent			Date
			ts Intangible Tax filing red und Contribution ().	quirement a	and elects to do so (X).		
OFFICERS	S AND DIREC	TORS:			ADDITIONS/CHANG	GES TO OF	FICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () MALEK, JOSEF 4027 ALABAMA ST PETERSBU	AVE NE	RD,		Title: Name: Address: City-St-Zip:	()Change	() Addition
Title: Name: Address: City-St-Zip:	VST () MALEK, D.MICH 4027 ALABAMA ST PETERSBU	AVE NE			Title: Name: Address: City-St-Zip:	()Change	() Addition
Title: Name:	D () MALEK, D.MICH	Delete HELE.			Title: Name:	() Change	() Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

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