

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # J33207 (8)

1. Corporation Name
ELECTRONIC TECHNICAL SERVICE CORP.

FILED
 1995 JUL 26 AM 10:18
 TALLAHASSEE, FLORIDA

Principal Place of Business
**14103 SW 66TH ST APT B4
 MIAMI FL 33183**

Mailing Address
**12707 SW 117TH ST.
 MIAMI FL 33186
 US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **09/11/1986** 3a. Date of Last Report **07/15/1994**

4. FEI Number **59-2781620** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election (Check appropriate box) ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 12707 SW 117TH ST.

Suite, Apt. #, etc.
22

City & State
23 MIAMI, FL

Zip Country
24 33186 25

2a. Mailing Address
26

Suite, Apt. #, etc.
27

City & State
28

Zip Country
29 33186 30

9. Name and Address of Current Registered Agent

**MARTINEAU, CLINTON
 14103 S.W. 66TH STREET, APT. #B4
 MIAMI FL 33183**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)
12707 SW 117TH ST

B3

B4 City **MIAMI** **FL** **B5 Zip Code** **33186**

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. ALTERNATE REGISTERED AGENTS	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	MARTINEAU, CLINTON	1.2 NAME	
STREET ADDRESS	14103 SW 66 ST APT. B4	1.3 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	1.4 CITY ST ZIP	
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY ST ZIP		2.4 CITY ST ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST 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 110.07(4)(b), 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.

SIGNATURE:

Clinton W. Martineau
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-12-95
 DATE

FILED