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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J41962

(8)

ELECTRONIC BARN, INC.

FILED Apr 23 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address			BAL DIBIR DIBIR DIDIR DIDIR DIDIR IBDI
200 S SEMORAN BLVD. ORLANDO FL 32807 US		204 S SEMORAN BLVD. ORLANDO FL 32807 US		DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified	
9 Principal Pi	ace of Business	2a. Mailing Address		11/05/1986 4. FEI Number	Applied For
21	act of Entoniose		MORAN BLUT	59-2878009	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	TODAY DELY	_	SR 75 Additional
22		27		5. Certificate of Status Desired L	Fee Required
City & State	9	City & State	_	Election Campaign Financing	\$5.00 May Be
23		28 ORLANIZO,	Fr	Trust Fund Contribution L	Added to Fees
Zip	Country	Zip	Country	This corporation owes or has paid to Personal Property Tax due June 30	
24	25 Name and Address of Curre	29 32%6へ ent Registered Agent	[30] US	10. Name and Address of New Regis	·
ALZNER, FRED C 81 Name					
204 S. SEMORAN BLVD.			82 Street /	ENIX, DAVID A Address (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32807				200 S. SEMBRAN BLVA.	
			83		
			84 City		85 Zip Code
				ORLANZO	FL 32807
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. Lam lamiliar with, and accept the obligations of, Section 607.0505, Florida Statules.					
SIGNATURE	Signature typed or printed name of registried a	gent aid sile it applicable (NO)	If: Registered Agent signature	required when reinstating)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN 12
TITLE	CD	☐ DEL€TE	1.1 TITLE	16 ¢ CEO	Change 🔀 Addition
NAME	ALZNER, FRED		1.2 NAME	HAVIT ENIX	
STREET ADDRESS	6504 ST. PARTIN PLACE		1.3 STREET ADDRESS	11313 DAVISON LANE	
CITY-ST-ZIP TITLE	ORLANDO FL CD	DELETE	1.4 CITY-ST-7IP 2.1 TITLE	TAUARES, FL 32778 PRESIDENT È CEO	Change X Addition
NAME	PERROTTI, FRED		2.2 NAME	JOSEH GIAMMARNICO	
STREET ADDRESS	6012 OLD TOWN DR.			2956 BAYHEAZ RUM	
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY - ST - ZIP	OVIETA FL JENGS	
TITLE	VO	DELETÉ	3.1 TITLE	VP TREASURER, COO	Change Addition
NAME	PERROTTI, ROBERT S		3.2 NAME	ROBERT PERROTTI	
STREET ADDRESS	926 GROVESMERE LOOP			926 GROVESINGRE LOOP	
CITY-ST-ZIP	OCEE FL	Doutte		OCACE FL 34761	Change Addition
TITLE		[] DELETE	41 TITLE	CHAIRMAN EMERITUS FRED PERROTTI	Change Addition
NAME Street address			4 2 NAME 4 3 STREET ADDRESS	8015 OFD LOPIN DEVE	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	Operando FL 32819	
TITLE		☐ DELETE	51 TITLE	<u> </u>	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		[] DELETE	61 TITLE		Change L Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY+ST-ZIP	ertify that the information supplied	with this filing does not qualify t	6.4 CITY-ST-ZIP for the exemption state	ed in Section 119.07(3)(i). Florida Statutes. I furt	ther certify that the information
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.					