

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J58861 (2)

1. Corporation Name

TARG-IT-TRONICS, INC.



Principal Place of Business

7100 TECHNOLOGY DR.
W. MELBOURNE FL 32904

Mailing Address

7100 TECHNOLOGY DR.
W. MELBOURNE FL 32904

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

g. Name and Address of Current Registered Agent

ROBECKI, RICHARD H
7100 TECHNOLOGY DR
W MELBOURNE FL 32904

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

3. Date Incorporated or Qualified

02/25/1987

3a. Date of Last Report

06/02/1995

4. FEI Number

59-2811039

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 date (Applicable)

(NOTE: Registered Agent Signature Required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME ROBECKI, RICHARD H.
STREET ADDRESS 7100 TECHNOLOGY DR
CITY-ST-ZIP MELBOURNE BCH FL

TITLE D ☒ DELETE
NAME HELLER, ROBERT W
STREET ADDRESS 5929 BAKER RD STE 470
CITY-ST-ZIP MINNETINKA MN

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME G. Wild
1.3 STREET ADDRESS East 15128 Euclid Avenue
1.4 CITY-ST-ZIP Spokane, WA 99216

2.1 TITLE Vice President & Treasurer ☒ Change ☐ Addition
2.2 NAME J. S. Leopold
2.3 STREET ADDRESS 460 E. Swedesford Road
2.4 CITY-ST-ZIP Wayne, PA 19087

3.1 TITLE Secretary ☒ Change ☐ Addition
3.2 NAME D. McL. Miller
3.3 STREET ADDRESS 460 E. Swedesford Road
3.4 CITY-ST-ZIP Wayne, PA 19087

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 119.07(3)(k), 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:

J. S. Leopold
J. S. Leopold, Vice President & Treasurer

4/24/96 (610) 971-3000

CR2E034 (12/95)