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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

| | 1996 | DIVISION C | OF CORPO | RATIONS | | | | |
|---|---|---|-----------------------|--------------------------|---|--|---|-----------------|
| 1. Corporation | - · · · · | 02 (7) | | | | | | |
| TOP | GUN ELECTRONICS, INC. | | | | | | | |
| | | | | | | | EN BIEN BIEN ALEN II | |
| Principal Plac | ce of Business | Mailing Address | | | | 110 1.11 0.11 0.14 0.14 0.1 | | |
| | LANA AVE PARK FL 32789 | 1121 SOLANA AVE Winter Park FL 3 | | | | | | |
| 2 Principal P | Place of Business | | | | 3. Date Incorporated or Qualified 05/12/1987 | 3s. Date of La 04/2 | st Report 5/1995 | 7 |
| 21 | 1856 OF DUSINESS | 2a. Mailing Address | | | 4. FEI Number | 1 | Applied For | - |
| Suite, Apt. | . #, etc. | Suite, Apt. #, etc. | | | 59-2803824 | | Not Applicabl | e |
| 22 | | 27 | | | 5. Certificate of Status Desired | | .75 Additional | |
| City & Stat | te | City & State | | | 6. Election Campaign Financing | ¢. | ee Required May Be | \dashv |
| Zip | Country | 28 | | | Trust Fund Contribution | └ A | dded to Fees | |
| 24 | 25 | 29 | 30 | ıntry | This corporation has liability for in Florida Statutes Yes | ntangible tax unde | ers 199.032, | 7 |
| | 9. Name and Address of Currer | nt Registered Agent | | <u> </u> | 10. Name and Address of New Re | | | _ |
| 61/11/10 | 37A1 | | | 81 Name | | Brotolen Manit | | \dashv |
| | STON, JAMES G. | | | 82 Street Add | ress (P.O. Box Number is Not Acceptable | ,l | | _ |
| | Fawsett Rd. Er Park Fl 32789 | | | | | 3) | | |
| *************************************** | IN FANK FL 32/09 | | | 83 | | · | | 7 |
| | | | | 84 City | | 85 | Zip Code | \dashv |
| 11. Pursuant t | to the provisions of Sections 607.0502 | and 607,1508, Florida Statute | es the abo | ve named corpor | ation submits this statement for the purp | | , | _ |
| or register familiar wit | red agent, or both, in the State of Floric ith, and accept the obligations of, Secti | da. Such change was authorize on 607,0505. Florida Statutos | ed by the c | orporation's boar | ation submits this statement for the purp rd of directors. I hereby accept the appoi | ose of changing i ntment as registe | ts registered offici red agent. I am | е |
| SIGNATURE | | | h | | | | are again. Can, | 1 |
| 12. | Signature, typed or printed name of registered agent | | TE Registered | Agent signature required | when reinstating) | DATE | · · · · · · · · · · · · · · · · · · · | . _ |
| TITLE | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFIC | | TORS IN 12 | CR2E034 (12/95) |
| NAME | BYINGTON, JAMES G. | ☐ DELETE | 1. 1 Ti | | | ☐ Chang | e 🔲 Addition | 15 |
| STREET ADDRESS | 1860 FAWSETT RD. | | 1.2 NA | | | | | 8 |
| CITY-ST-ZIP | WINTER PARK FL | | | REET ADDRESS | | | | ြည် |
| TITLE | ST | DELETE | 2 1 TIT | Y-ST-ZIP | | C7 (t | P-1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | _ 쏬 |
| NAME | Byington, Deborah S. | | 22 NA | | | ☐ Chang | e Addition | 1 |
| STREET ADDRESS | 1860 FAWSETT RD. | | 23516 | EET ADDRESS | | | | |
| CITY-ST-ZIP | WINTER PARK FL | | 2 4 CIT | Y-51-21P | | | | |
| TITLE NAME | | ☐ DELEJE | 3 1 TIT | LE | | ☐ Chang | e 🗍 Addition | 1 |
| STREET ADDRESS | | | 3.2 NAM | 1 | | | _ | |
| CITY-ST-ZIP | | | | REET ADDRESS | | | | 1 |
| TITLE | | DELETE | 3.4 CITY 4. 1 TITI | -ST-ZIP | | | | |
| NAME | | | 4.2 NAM | | | Change | Addition | |
| STREET ADDRESS | | | - 1 | EET ADORESS | | | | |
| CITY - ST - ZIP | · | | | -ST-ZIP | | | | 1 |
| TITLE | | ☐ DELETE | 5. 1 TITE | | | Change | Addition | - |
| NAME CIDEET ADDRESS | | | 5.2 NAM | E | | | - 100/00/ | 1 |
| STREET ADDRESS CITY-ST-ZIP | | | 5.3 STRE | ET ADDRESS | | | | |
| TITLE | | Deter | 5.4 CITY | | | | | |
| NAME | | DELETE | 6. 1 TITL | | · · · · · · · · · · · · · · · · · · · | ☐ Change | ☐ Addition | 1 |
| STREET ADDRESS | | | 62 NAM | ł | | | | |
| DITY-ST-ZIP | | | C 4 O(T) | ET ADDRESS | | - | | |
| 14. I do hereby | certify that the information supplied wit | h this filing is valuntarily furniel | 64 CITY | -31-ZIP | | | | 1 |

no hereby certify that the information supplied with this filling 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 appears in Block 12 or Flock 13 if changed, or on an affatyment with an address.

SIGNATURE: