

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90138 041 ***150.00

DOCUMENT # K15234

1. Corporation Name
PALM ELECTRONICS MANUFACTURING CORP.

Principal Place of Business

16115 N.W. 52ND AVENUE
2000
MIAMI FL 33014
US

Mailing Address

16115 N.W. 52ND AVENUE
2000
MIAMI FL 33014
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/17/1988

4. FEI Number

65-0050230

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

Trust Fund Contribution

☐

8. This corporation owes the current year Intangible

Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

TITLE VPSC ☐ DELETE

NAME FLANDERS, HOWARD L.
STREET ADDRESS 16115 N.W. 52ND AVENUE
CITY-ST-ZIP MIAMI FL

TITLE DCEO ☐ DELETE

NAME PAUL GOLDBERG
STREET ADDRESS 16115 NW 52ND AVENUE
CITY-ST-ZIP MIAMI FL

TITLE PCOO ☐ DELETE

NAME BRUCE M GOLDBERG
STREET ADDRESS 16115 NW 52ND AVENUE
CITY-ST-ZIP MIAMI FL

TITLE VP ☐ DELETE

NAME RICK GORDON
STREET ADDRESS 230 DEVCON DRIVE
CITY-ST-ZIP SAN JOSE CA

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

V/S/T/D

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

D/C

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

P/D

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

230 Devcon Drive
San Jose, CA 95112

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

Howard L. Flanders

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Howard L. Flanders

2-2-99 (305)621-8282

Date

Daytime Phone #

CR2E034 (11/98)

0131621