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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 28 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K71022

HAHN ELECTRIC CORP.

SIGNATURE:

(3)

Principal Plac	ce of Business		Mailing Addres	SS				I IODITALI DIE IODEI CIDII ONILO 14819 1181	BIBIT BIBIT	APRIN SIRIL REGEL	BIBIT IDDI
105 \$W B COL HALLANDALE F			9720 PINES BLVD. PEMBROKE PINES FL 33024-6228 US								
								3. Date Incorporated or Qualified 03/07/1989		ate of Last R 24/1996	eport
2. Principal Place of Business			2a. Mailing Address					4. FEI Number	Applied For		
1			26				N-1	59-1744842	Not Applicable		
Suite, Apt.	#, etc.	Ĺ.	— Suite, Apt. a	#. etc.				5. Certificate of Status Desired			Additional
2		2									equired
City & Stat	te	<u></u>	City & State	9				6. Election Campaign Financing	C1	\$5.00	May Be
3. Zip	T 66	unitry 2		-/T	Country			Trust Fund Contribution	LJ	Added	
4	} <u>-</u> -	· ' -	Z₁p 	}		y		8. This corporation has liability for	intangible 7 Yes		. 199.032,
41	9. Name and Ac	2 Idress of Current Re			30	_		Florida Statutes 10. Name and Address of New Re			
HAH	IN, JEROME, T				81	T	Name	10.	3.0.0.00	rigoin .	
	SW 8 COURT					1					
	LANDALE FL 3300	19			82	1	Street Addre	ess (P.O. Box Number is Not Acceptat	ole)		
					83	+					
•					ļ	_					
					84	1	City		FL	85 Zip (Code
11. Pursuant	to the provisions of	Sections 607.0502 and	d 607, 1508. Flo	rida Statute	s. the abov	L re-:	named corpo	oration submits this statement for the p	ILITINOSE C	f changing if	s registered
office or r	registered agent, or	both, in the State of Fi	orida. Such cha	inge was a	uthorized b	y t	he corporation	on's board of directors. I hereby acce	ot the app	cointment as	registered
	arn fairmiar with, and	accept me obligations	s or, Section bu	7.0505, FIOI	поа Бтатите	98.					
SIGNATURE	Simple typed or period	niver of registered agent and	Interfacel cable	(NOTE	Begistered An	ien!	sionalure require	ed when reinstating)	DATE		
12.		OFFICERS AND DIF	· · · · · · · · · · · · · · · · · · ·	(1312	13.			ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	RS IN 12
MLE	PTSD			DELETE	1.1 THTLE					Change	☐ Addition
NAME	HAHN, JEROME				1.2 NAME						
SPREET ADDRESS	105 SW 8TH CT				1.3 STREE	ΤA	DORESS				
CITY - ST - ZIP	HALLANDALE F	L			1.4 CITY~!	ST-	ZIP				
THE				DELETE	2.1 TITLE				····	Change	Addition
NAME					2.2 NAME						
STREET ADDRESS					2.3 STREE	ΤA	DDRESS				
CITY - S1 - ZIP					2.4 CiTY-	·ST	ZIP				
TOLE				DELETE	3.1 THTLE			7-11-11-11-11-11-11-11-11-11-11-11-11-11		Change	☐ Addition
NAME					3.2 NAME		.				
STREET ADDRESS					3.3 STREET	ΤA	DDRESS				
CITY - ST - ZIP					3.4. CITY-	ST	-ZIP				
MILE				DELETE	4.1 TITLE					Change	Addition
NAME					4. 2 NAME						
STREET ADDRESS					4.3 STREE	ΙÁ	DDRESS				
CITY - S1 - ZIP	ļ				4.4 CITY~	ST-	ZIP				
TiTué				DELETE	5.1 TITLE		'			Change	Addition
NAME	!				5,2 NAME			•			
STREET ADDRESS					5.3 STREET	ΤA	DDRESS	-			
CITY - S1 - ZIF			····		5.4 CITY - :	ST-	ZIP	*			
TOLE	i			DELETE	6.1 TITLE					Change	Addition
NAME					6.2 NAME						
STREET ADDITIESS					6.3 STREE	ΪÁ	DORESS				
CHTY - ST - 7/P	ļ				6.4 CITY - 5						
Information and	on indicated on this a officer or director of t	omiation supplied with annual report or suppli by carporation or the r Wifichanged, or on a	emental annual receiver or trust	report is tri ee empoye	o and acc ered to exec	err cur cu	iption stated ate and that i te this report	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega as required by Chapter 607, Florida S	s. I turthe al effect a Statutes; a	ir certify that is if made unit and that my r	tne der oath; that name

PRESIDENT

1/11/97

954-454-5628

Daytime Phone #