NAME STREET ADDRESS CITY-ST-ZIP

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**FILED** Apr 02, 2007 08:00 Secretary of Stat

2.0	ANNUAL	REPORT				Secretary
DOCUMENT # K72077  1. Entity Name ELECTRONIC INDUSTRIAL EQUIPMENT, INC.						Secretary
Principal Place 1917 SE 19TH CAPE CORAL. I	H COURT	Mailing Address 1917 SE 19TH COURT CAPE CORAL, FL 33990	···			
				03272007	No Chg-P	CR2E034 (11/05)
D(	O NOT WRITE	IN THIS SPA	CE	4. FEI Num 65-01	ber <b>82407</b>	Applied For Not Applicable  \$8.75 Additional
	6. Name and Address of Current Re		1. (28) (40) (1 14) (1) (1) (1)	5. Certifica	te of Status Desired	Fee Required
CAPE COR	MILE COVE PKWY AL, FL 33990			IN	NOT W THIS SF	ACE
the obligation	named entity submits this statement for the one of registered agent.  Signature, typed or printed name of registered agent and			egistered agent, or t	ooth, in the State of Pic	DATE
	NOW!!! FEE IS \$150.00 y 1, 2007 Fee will be \$550.00	Election Campaign Fina     Trust Fund Contribution		\$5.00 May Be Added to Fees		
NAME STREET ADDRESS	OFFICERS AND DIF D STEGMANN, HANS R. 1917 SE 19TH CT CAPE CORAL, FL	RECTORS	-			
TITLE NAME STREET ADDRESS	D STEGMANN, REINHILDE M. 1917 SE 19TH CT. CAPE CORAL, FL				J006 04/06/0	100685125 17+80060+013 150:00
NAME STREET ADDRESS	D STEGMANN, MELANIE 1917 SE 19TH CT. CAPE CORAL, FL			DC	NOT W	'RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SF	PACE
TITLE					ida da Kalibbakai	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hans Stepm HANS STEGMANN	03/29/07	239-772-7925
MONATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR President	/ Data	Daytme Phone #