

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO RESTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # K83308 (2)

1. Corporation Name

POWELL ELECTRONICS WASHINGTON, INC.

Principal Place of Business

3540 W. PROSPECT RD.
FT. LAUDERDALE FL 33309

Mailing Address

P.O. BOX 8765
PHILADELPHIA PA 19101

FILED

95 JUL 18 AM 10:46

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/25/1989

3a. Date of Last Report

07/07/1994

4. FBI Number

52-0787395

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MCGAIN, TREVOR
3540 W. PROSPECT RD.
FT. LAUDERDALE FL 33309

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

DC

NAME

POWELL, HAROLD H

STREET ADDRESS

OCEAN REEF CLUB P7076

CITY - ST - ZIP

KEY LARGO FL

TITLE

D

NAME

WOLFSON, MERLE A.

STREET ADDRESS

1818 MARKET ST.

CITY - ST - ZIP

PHILADELPHIA PA

TITLE

DVC

NAME

NANNOS, ARTHUR

STREET ADDRESS

S. ISLAND RD. ENTERP AVE

CITY - ST - ZIP

PHILADELPHIA PA

TITLE

DP

NAME

BROWN, MILLARD D. II

STREET ADDRESS

SOUTH ISLAND ROAD, ENTERPRISE AVENUE

CITY - ST - ZIP

PHILADELPHIA PA

TITLE

D

NAME

BROWN, MILLARD L.

STREET ADDRESS

57 GILSON RD.

CITY - ST - ZIP

JEFFREY NH

TITLE

VT

NAME

CARROLL, ROBERT

STREET ADDRESS

SOUTH ISLAND ROAD, ENTERPRISE AVENUE

CITY - ST - ZIP

PHILADELPHIA PA

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 110.07(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 in an attachment with an address.

SIGNATURE:

Robert R. Carroll

ROBERT R. CARROLL

6/28/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (3/95)