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 Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90035 021 ***150.00

DOCUMENT # L14774 1. Corporation Name

SOMERSET ELECTRONICS, INC.

	·							
Principal Place of Business Mailing Address):B; 01011 01011 01011 01011 0		
	A1A. SUITE 206		1290 HIGHWAY A1A. SUITE 206					
SATELLITE BEACH FL 32937		SATELLITE BEACH FL	32937		DO NOT WRITE	DO NOT WRITE IN THIS SPACE		
	***				3. Date Incorporated or Qualifed		-	
•	i i				09/08/1989			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
21		26			59-2967880	No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	: Suite, Apt. #, etc.			S8.75 /		
22	•	27			5. Certificate of Glatus Desired	Fee Re	equired	
City & State		City & State			6. Election Campaign Financing	□ \$ 5.00		
23		28			Trust Fund Contribution	Added t	to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current	t year Intangible ☐ Yes	ÆNo	
24	25 9. Name and Address of Cu	29 Agent	30		Personal Property Tax. 10. Name and Address of New Res		20140	
	9. Name and Address of Co	itelit Kegisteleu Agelit		81 Name	1///	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
BELGIN, MICHAEL F.					/Y/ <i>f</i> 4			
	NEPTUNE COURT	•		82 Street A	Address (P.Ø. Box Number is Not Acceptable	3)		
INDIALANTIC FL 32903				83				
				21 20		ag 7:_	Code	
				84 City		FL 85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Si	atutes, the a	ove-named (corporation submits this statement for the pu	rpose of changing its	registered	
office or r	egistered agent, or both, in the Si im familiar with and accept the ob	ate of Florida. Such change w ligations of, Section 607.0505	as autnorized Florida Stati	i by the corpo ites.	ration's board of directors. I hereby accept t	ne appointment as re	gistered	
SIGNATURE	William of V	el 9 -			Han	1 20,1999	7	
SIGNATURE	Signature; typed or printed name of registered	agent and title if applicable. (NOTE: Registered	Agent signature re	quired when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	PRS IN 12	
TITLE	CPV	☐ DELETI			CLA!		5.4 Magnion	
NAME	BELGIN, MICHAEL F.		1.2 NA	ME	Bolgin, Michael F. 100 Neptune Count Indialantic, FL 3			
STREET ADDRESS	100 NEPTUNE COURT	•		REET ADDRESS	100 NepTUNE COUNT	2907		
CITY-ST-ZIP	INDIALANTIC FL	☐ DELETI			I NOTALANTIE, IL DO	Change	Addition	
TITLE		C) DETERM	·	\		□ o.ioiigo		
NAME	,		2.2 NA					
STREET ADDRESS	f			REET ADORESS				
CITY-ST-ZIP		☐ DELETI		TY-ST-ZIP		Change	Addition	
TITLE			3.2 N/					
NAME		· —		REET ADDRESS	** · · · · · · · · · · · · · · · · · ·	·		
STREET ADORESS				TY-ST-ZIP				
CITY-ST-ZIP TITLE		☐ DELET				Change	Addition	
NAME			4. 2 N					
STREET ADDRESS				REET ADDRESS				
i	,			TY-ST-ZIP				
CITY-ST-ZIP TITLE		DELETI				Change	☐ Addition	
NAME		_	5.2 N/	1			_	
STREET ADDRESS	+			REET ADDRESS				
	,			TY-ST-ZIP				
TITLE		☐ DELETI				☐ Change	☐ Addition	
NAME	,		62 N	ME			i	
	l .		J	REET ADDRESS				

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, of on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP