-FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnam ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (1)RETRONIC INTERNATIONAL, INC. Principal Place of Business Mailing Address 218 COMMERCIAL BLVD. SUITE 204 218 COMMERCIAL BLVD. SUITE 204 LAUDERDALE-BY-THE-SEA FL 33308 LAUDERDALE-BY-THE-SEA FL 33308 3. Date Incorporated or Qualified 3a. Date of Last Report 02/05/1985 06/09/1995 2. Principal Place of Business 2a. Mailing Address 4. FELNumber Applied For 21 26 59-2492209 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Γ 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Country 8. This corporation has liability for intangible tax under s. 199,032, 24 25 29 Yes No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BURKART, GUENTER** Street Address (P.O. Box Number is Not Acceptable) 82 218 COMMERCIAL BLVD. 83 SUITE 204 LAUDERDALE-BY-THE-SEA FL 33308 64 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, Spection printed have a unregistered agent and use a apparatu NOTE: By a smoot Agent signature record of when remodating (12/95)12 OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIT.E DELETE 1.1 TITLE Change Addition NAME **BURKART, GUENTHER** 1.2 NAME CR2E034 STREET ADDRESS 218 COMMERCIAL BLVD. SUITE 204 1.3 STHEET ADDRESS LAUDERDALE-BY-THE-SEA FL 0174-51-712 1.4 CITY - S* - 7IP TITLE DELETE 2.1 JULE Change ☐ Addition NAME 2.2 NAM5 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CHY - \$1 - ZIP TITLE DELETE 3 1 THUE Cnange Addition 3.2 NAME STREET ADDRESS 3.3 STHEET ADDRESS CITY - ST - ZIP 3.4 CHY+ST, ZIP TITLE DELETE 4 1 TIME Change Addition NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 Cilly - ST ZIF TIFLE ☐ DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - \$T - ZIP 5.4 CITY - ST - ZIP DILE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7-P 6.4 CHY ST-ZiP 14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on ruis annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chartier, or on an attachment with an address.

NING OFFICER OR DIRECTOR

SIGNATURE:

SIGNATURE AN

4/17/96 an 954-772 2225