

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
BUREAU OF CORPORATIONS
TALLAHASSEE, FLORIDA 32301-0001

FILED
SECRETARY OF STATE
BUREAU OF CORPORATIONS

DOCUMENT # **M17613**

(4)

95 MAY -1 PM 2:17

C.E.A. ELECTRONICS INTERNATIONAL, INC.

1. Principal Office of Corporation 6555 NW 36TH ST. SUITE 208 MIAMI FL 33166 US		Mailing Address 6555 NW 36TH ST SUITE 208 MIAMI FL 33166 US		3. Date of Incorporation (If Applicable) 07/03/1985	3a. Date of Last Report 06/14/1994
2. Principal State of Incorporation 21 FL	2a. Mailing Agency 26	4. Filing Number 59-2623278	5. Certificate of Status (Required) \$8.75 Additional Fee Required		
22. State Agent # (Req) 22	27. State Agent # (Req) 27	6. Election Campaign Financing Trust Fund Contribution 23	\$5.00 May Be Added to Fees		
23. City & State 23	28. City & State 28	8. The corporation has liability for compliance to order by the FLA, Florida Statute ☒ Yes ☐ No			
24. 24	25. 25	29. 29	30. 30		

9. Name and Address of Current Registered Agent GALAN, KAROL 655 NW 36TH ST. SUITE 208 MIAMI FL 33166		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 607.01(2)(b) and 607.01(3)(b), Florida Statutes, the above named corporation certifies this statement for the purpose of changing its registered office or registered agent, in both in the State of Florida. This change was authorized by the corporation's board of directors, members, or agent and the agent of the corporation.

SIGNATURE: _____

12. ADDITIONAL REGISTERED AGENTS NAME: PD GALAN, KAROL STREET ADDRESS: 607 PATIO VILLAGE WAY CITY: FT. LAUDERDALE FL		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS NAME: _____ STREET ADDRESS: _____ CITY: _____ NAME: _____ STREET ADDRESS: _____ CITY: _____ NAME: _____ STREET ADDRESS: _____ CITY: _____ NAME: _____ STREET ADDRESS: _____ CITY: _____ NAME: _____ STREET ADDRESS: _____ CITY: _____ NAME: _____ STREET ADDRESS: _____ CITY: _____	
--	--	--	--

14. I hereby certify that the information supplied with this filing is voluntarily furnished and true, and qualify for the exemption status as has been established by the Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if signed by me. I am an officer or director of the corporation or the owner of the corporation and I am not a resident of the State of Florida. I am not a resident of the State of Florida and I am not a resident of the State of Florida.

SIGNATURE: *Karla Galan* **KIERA GALAN**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 4-28-95
 205-171-01-33
 0100949 CP