

## ANNUAL REPORT

DOCUMENT # M24160

1. Entity Name

FLORIDA INDUSTRIAL ELECTRONICS, INC.

May 18  
Sec1

Principal Place of Business

1547 N. FL MANGO RD.

BLDG 14-6

W. PALM BCH., FL 33409 US

Mailing Address

1547 N. FL MANGO RD.

BLDG 14-6

W. PALM BCH., FL 33409 US



05162005

No Chg-P

CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2608699

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ESQUIVEL, HERMAN  
725 KITTYHAWK WAY  
NORTH PALM BCH, FL 33408DO NOT WRITE  
IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
Due by September 7, 20059. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME ESQUIVEL, HERMAN  
STREET ADDRESS 725 KITTYHAWK WAY  
CITY-ST-ZIP NORTH PALM BCH, FLTITLE STD  
NAME SCOGGINS, CAROLYN  
STREET ADDRESS 10158 ASPEN WAY  
CITY-ST-ZIP WEST PALM BEACH, FL 33410TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP000000367470  
05/18/05-80003-007 150.00DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/16/05 561-686-8400

Date

City/Time Phone #