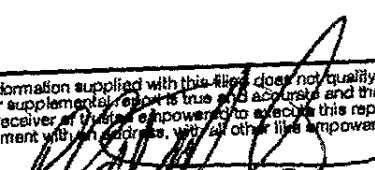


FILED
Apr 30, 2004 08:00 AM
Secretary of State

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000041301		
1. Entity Name BOCA MICROSYSTEMS INCORPORATED		
Principal Place of Business 5667 PINECREST CIRCLE BOCA RATON, FL 33433		Mailing Address PO BOX 273787 BOCA RATON, FL 33427-3787
DO NOT WRITE IN THIS SPACE		
		04282004 No Chg-P CR2E034 (10/03)
		4. FEI Number 65-1008934
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
8. Name and Address of Current Registered Agent ARNAO, PHILLIP M 5667 PINECREST CIRCLE BOCA RATON, FL 33433		DO NOT WRITE IN THIS SPACE
9. 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.		DATE _____ (NOTE: Registered Agent signature required when reinstating)
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		000000142745 04/30/04-80064-014 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO ARNAO, PHILLIP M 5667 PINECREST CIR. BOCA RATON, FL 33433	DO NOT WRITE IN THIS SPACE
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12. 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 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 the receiver 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 lines empowered.		
SIGNATURE _____ 		April 28, 2004 561-362-5924