

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068774

Entity Name: CRAIG ELECTRONICS INC.

FILED  
Apr 25, 2007  
Secretary of State

**Current Principal Place of Business:**

1160 NW 163RD DRIVE  
MIAMI GARDENS, FL 331695816 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 694660  
MIAMI, FL 332691660 US

**New Mailing Address:**

FEI Number: 65-1128581

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NEWMAN, JOEL  
355 OCEAN BOULEVARD  
GOLDEN BEACH, FL 331602211 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: NEWMAN, JOEL  
Address: 355 OCEAN BOULEVARD  
City-St-Zip: GOLDEN BEACH, FL 331602211 US

Title: VD ( ) Delete  
Name: NEWMAN, ELLIOT  
Address: 355 OCEAN BOULEVARD  
City-St-Zip: GOLDEN BEACH, FL 331602211 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL NEWMAN

PSTD

04/25/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date