

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90076 002 ***150.00

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1. Entity Name
CONNECTRONICS CORP.



Principal Place of Business
3000 TAFT ST.
HOLLYWOOD, FL 33021

Mailing Address
3000 TAFT ST.
HOLLYWOOD, FL 33021

40105099



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04232007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
20-1971140

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MENDELSON, VICTOR H ESQ.
825 BRICKELL BAY DR., STE. 1644
MIAMI, FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DT
NAME IRWIN, THOMAS S ☐ Delete
STREET ADDRESS 3000 TAFT ST.
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P
NAME RICKETTS, THOMAS L ☐ Delete
STREET ADDRESS 2745 AVONDALE AVE
CITY-ST-ZIP TOLEDO, OH 43607

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME MOCEK, AL ☐ Delete
STREET ADDRESS 2745 AVONDALE AVE
CITY-ST-ZIP TOLEDO, OH 43607

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME VETTER, JUDITH W ☐ Delete
STREET ADDRESS 3000 TAFT ST
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS
NAME LETENAE, ELIZABETH R ☐ Delete
STREET ADDRESS 3000 TAFT ST
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE AS ☒ Change ☐ Addition
NAME Letendre, Elizabeth
STREET ADDRESS 3000 Taft St
CITY-ST-ZIP Hollywood, FL 33021

TITLE VC
NAME MENDELSON, VICTOR H ☐ Delete
STREET ADDRESS 3000 TAFT ST
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Thomas S Irwin

4-23-07

9547447560