## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P25529

(9)

AIM ELECTRONICS CORPORATION

**FILED** Apr 01 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address						
4880 N HIATU	JS ROAD	4880 N HIATUS ROAD						
SUNFISE FL 33351		SUNRISE FL 33351			DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	110 OF AOL		
					08/08/1989			
9 Principal Pi	lace of Business	2a, Mailing Address			4. FEI Number	Applied For		
21		26			36-3647869	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.			\$8.75 Additional			
22		27		5. Certificate of Status Desired	Fee Required			
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be			
23		28		Trust Fund Contribution	Added to Fees			
Zip	Country	Zip	Country	1	8. This corporation owes or has paid the	current year Intangible		
24	25	29 30	3		Personal Property Tax due June 30.	Yes No		
	g, Name and Address of Current	Registered Agent			10. Name and Address of New Register	red Agent		
CT	CORPORATION SYSTEM		81	Name				
120	00 S. PINE ISLAND ROAD		82	Street A	Address (P.O. Box Number is Not Acceptable)			
	ANTATION FL 33324		02	300007	Address (1.0. Dox Hamber 18 Not Acceptable)			
			83					
			84	- Cia.		- 85 Zip Code		
			04	City	F	Zip Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named	corporation submits this statement for the purpos	se of changing its registered		
office or re agent. La	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth itions of Section 607.0505. Florid	norized b la Statute	y the corp s.	poration's board of directors. I hereby accept the	appointment as registered		
SIGNATURE	g.							
SIGNATURE	Signature, typid or printed name of registried age	c and tillo diapplicable (NOTE: R	egistered Ag	ont signature	required when reinstating) DAI			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	P	☐ DELETE	1.1 TITLE		•	Change Addition		
NAME	ROSENBAUM, ARNIE	j	1.2 NAME		ROSENBLUM (CORRECTION	)		
STREET ADDRESS			1.3 STREE	ADDRESS	`	· <b>'</b>		
CITY-ST-ZIP	SUNRISE FL		1.4 CITY-	ST - ZIP				
TITLE	V	☐ DELETE	2.1 TITLE			Change Addition		
NAME	BOUCHER, JONATHAN		2.2 NAME					
STREET ADDRESS	534 FOREST AVENUE		2.3 STREE	ADDRESS				
CITY-ST-ZIP			2. 4 CITY-	ST - ZIP				
TITLE	SD	☐ DELETE	3.1 TITLE			Change Addition		
NAME	QUINN, THOMAS H.		3.2 NAME					
STREET ADDRESS	1751 LAKE COOK ROAD		3.3 STREE	ADDRESS		,		
CHTY-ST-ZIP	DEERFIELD IL	——————————————————————————————————————	3.4. CITY-	ST-ZIP		[ ] Ot		
THILE	VP	☐ DELETE	4.1 TITLE			Change Addition		
NAME	GRANSON, ROBERT		4. 2 NAME					
STREET ADDRESS	4880 N. HIATUS ROAD			ADDRESS				
CITY-ST-ZIP	SUNRISE FL	T se sta	4.4 CITY-	ST-ZIP		Dinessa   Lagres		
TITLE		☐ DELETE	5.1 TITLE			Change Addition		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	ADDRESS				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TATLE		☐ DELETE	61 TITLE			Change Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

954 744-9900