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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P31757 (8)

1. Corporation Name

KALTEC ELECTRONICS, INC.



Principal Place of Business

5040-B TAMPA WEST BLVD
TAMPA FL 33634

Mailing Address

5040-B TAMPA WEST BLVD
TAMPA FL 33634

3. Date Incorporated or Qualified

11/07/1990

3a. Date of Last Report

04/20/1995

2. Principal Place of Business

21 5414 W. Crenshaw St

2a. Mailing Address

26 5414 W. Crenshaw St

4. FEI Number

84-1046068

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PHILLIPS, GEORGE W.
8001 NO. DALE MABRY
SUITE 401-A
TAMPA FL 33614

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VC ☐ DELETE

NAME LEE, HEE K.
STREET ADDRESS 5410 DEERBROOKE CREEK CI
CITY-ST-ZIP TAMPA FL

TITLE DP ☒ DELETE

NAME YOO, GWANG PIL
STREET ADDRESS 4143 ROLLING SPRGS DR
CITY-ST-ZIP TAMPA FL

TITLE ST ☐ DELETE

NAME LEE, HEE K.
STREET ADDRESS 12808 WALLINGFORD DR
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME President
1.3 STREET ADDRESS LEG, HEE K
1.4 CITY-ST-ZIP 12808 Wallingford Dr
TAMPA FL 33624

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME V. President
2.3 STREET ADDRESS Jun. Young
2.4 CITY-ST-ZIP 4310 Placer Le Monnes
Lutz FL 33549

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-5-96

888-9555

Date

Daytime Phone

CR2E034 (12/95)

3-18-1996