**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.**
**AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)**

PROFIT CORPORATION ANNUAL REPORT
**1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 22 AM 9:13

DOCUMENT # **P92000013823 (9)**

1. Corporation Name
**ASTRO COMP TECHNOLOGIES, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 6278 N FEDERAL HIGHWAY<br>SUITE 388<br>FT. LAUDERDALE FL 33308 | 6278 N FEDERAL HIGHWAY<br>SUITE 388<br>FT. LAUDERDALE FL 33308 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/15/1992
3a. Date of Last Report: 04/15/1994

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 2700 NW 62nd St | 26 2700 NW 62nd St |
| Suite, Apt. #, etc.<br>22 Suite B111 | Suite, Apt. #, etc.<br>27 Suite B111 |
| City & State<br>23 Ft. Lauderdale, FL | City & State<br>28 Ft. Lauderdale, FL |
| Zip / Country<br>24 33309 25 | Zip / Country<br>29 33309 30 |

4. FEI Number: 65-0380594 ☐ 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 | 10. Name and Address of New Registered Agent |
|---|---|
| BESH, PAMELA J<br>6278 N FEDERAL HIGHWAY<br>SUITE 388<br>FT. LAUDERDALE FL 33308 | 61 Name<br>62 Street Address (P.O. Box Number is Not Acceptable): 2700 NW 62nd St.<br>63 Suite B111<br>64 City: Ft. Lauderdale FL 65 Zip Code: 33309 |

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: Pamela J Besh  Pamela J Besh, President  6/19/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, TYPE OF X | |
|---|---|---|---|
| TITLE | P | 11 TITLE | ☒ Change ☐ Addition |
| NAME | BESH, PAMELA J | 12 NAME | |
| STREET ADDRESS | 5320 NE 32ND AVE. | 13 STREET ADDRESS | 760 NE 28th Ave |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33308 | 14 CITY-ST-ZIP | Pompano Beach, FL 33062 |
| TITLE | | 21 TITLE | ☐ Change ☐ Addition |
| NAME | | 22 NAME | |
| STREET ADDRESS | | 23 STREET ADDRESS | |
| CITY-ST-ZIP | | 24 CITY-ST-ZIP | |
| TITLE | | 31 TITLE | ☐ Change ☐ Addition |
| NAME | | 32 NAME | |
| STREET ADDRESS | | 33 STREET ADDRESS | |
| CITY-ST-ZIP | | 34 CITY-ST-ZIP | |
| TITLE | | 41 TITLE | ☐ Change ☐ Addition |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY-ST-ZIP | | 44 CITY-ST-ZIP | |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | |

CR2E034 (3/95)

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)(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.

**SIGNATURE:** Pamela J Besh Pres.  Pamela J. Besh, Pres  6/19/95  305969 0050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  (Corporate Charter #)

0072402 CP