## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	P93000008105	(7)	
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1. Corporation Name

B B K ELECTRONICS, INC.

Principal Place of Busin	0 <b>5</b> 8	

Mailing Address

9470 SACRAMENTO DRIVE NEW PORT RICHEY FL 34655 9470 SACRAMENTO DRIVE NEW PORT RICHEY FL 34655



NEW PURI	NICHEL PL 34033	NEW FORT NOTEL	L 34033					
					3. Date Incorporated or Qualified 02/02/1993	3a. Date of 1	8/1995	
2. Principal P	Place of Business	2a. Mailing Address		· · · · · · · · · · · · · · · · · · ·	4. FEI Number 59-3171278			lied For
21		26			39-31/12/6			Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$</b>	Fee Req	
City & Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 N Added to	•
<b>23</b> ] Zip	Gountry	28 Zip	Cour	nto/	8. This corporation has liability for i	ntanoible tax u		
	25	29	30	,		□ No	100.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
24	9. Name and Address of Currer		1001	<del></del>	10. Name and Address of New R	egistered Age	ent	
				81 Name				
KLAUS	CH, ROBERT L		,	00 00 00	ress (P.O. Box Number is Not Acceptab	day		
	ACRAMENTO DRIVE		[	82 Street Addi	ress (P.O. Box Number is Not Acceptab	ю		
	PORT RICHEY FL 34655		Ì	B3				
			-	84 City		FI	35 Zip C	ode
					ration submits this statement for the pur		1	stand a Con
familiar w	vith, and accept the obligations of, Sect	tion 607.0505, Florida Statute	BS.		rd of directors. I hereby accept the appx			
	Signature, typed or printed name of registered agen	and the Lapplicable (IDD RECTORS)		Agent signature require	ADDITIONS/CHANGES TO OFF	DATE	DECTORS	IN 12
12.	DPST OFFICERS AN	DELETE	13.	TI 6	ADDITIONS/CHANGES TO OFF			Addition
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14. I do here	eby certify that the information supplied	with this filing is voluntarily fu	rnished and	does not qualify	for the exemption stated in Section 119	.D7(3)(k), Florid	a Statutes	. I further

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 is 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 1 changed, or on an attachment with an address.

SIGNATURE:

CHATURE AND TYPED OR PRINTED SUMMER OF SIGNING OFFICER OR DIRECTOR

3/6/91 813-376-5661