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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300010543 (5) HITECH ELECTRONIC SERVICES, INC.

## FILED May 01 1997 8:00am Secretary of State

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| (Principal Place of Business Mailing Address |   |                                   |   |          |               | E ISOURSON IND VOIDS VEIN DONN ODING OOL   | isan ilin 10180 bilan danin annin anlin Sérbi didin Abide Silin Srade ilin iadi |                              |                |  |
|--|---|-----------------------------------|---|----------|---------------|--|---|------------------------------|----------------|--|
| <b>5061 FUNSTON</b>                          | I 8T  | 5981 FUNSTON ST                   | 5981 FUNSTON ST                         |          |               |  |   |                              |                |  |
| BTE A2<br>HOLLYWOOD FL 33023                 |   | STE A2                            | ···                                     |          |               | }  |   |                              |                |  |
| HULLTWOOD F<br>US                            | L 33023   | HÖLLYWOOD FL 33023-19<br>US       | 900                                     |          |               | 0 Data land a Constitution of the constitution | TA: 5:  |                              | <u> </u>       |  |
|  | _   | 00                                |   |          |               | 3. Date Incorporated or Qualified 02/11/1993   |   | te of Last<br><b>19/1996</b> |                |  |
|  | lace of Business  | 2a. Mailing Address               |   |          |               | 4. FEI Number  |   |                              | Applied For    |  |
| 1  |   | 26                                | · • · · · · · · · · · · · · · · · · · · |          |               | 65-0387454 Not Applica   |   |                              |                |  |
| Sulte, Apt.                                  | #, <del>0</del> tc.   | Suite, Apt. #, étc.               | Suite, Apt. #, etc.                     |          |               | 5. Certificate of Status Desired   | esired S8.75 Additional Fee Required  |                              |                |  |
| City & State                                 | 6   | City & State                      |   |          |               | 6. Election Campaign Financing   |   |                              |                |  |
| 3  |   | 28                                |   |          |               | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees  |   |                              |                |  |
| Zip  | Country   | Zψ                                | Coun                                    | try      |               | 8. This corporation has liability for  | intangible  | tax under                    | s. 199.032,    |  |
| 4  | 25  | 29                                | 30                                      |          |               | Florida Statutes   | Yes 🗷   | No                           |                |  |
| = 16   | 9. Name and Address of Cu   | rrent Registered Agent            |   | n a T    |               | 10. Name and Address of New R  | agistered A   | igent                        |                |  |
|  | RESEN, THORE  |                                   |   | B1       | Name          |  |   |                              |                |  |
|  | I SW 32ND AVE<br>TE 38  |                                   | 8                                       | 32       | Street Add    | dress (P.O. Box Number is Not Accepta  | ble)  |                              |                |  |
|  | LYWOOD FL 33023   |                                   | ε                                       | 33       |               |  | <del></del>   |                              |                |  |
| :  |   |                                   |   | 84       | City          |  |   | 85 Zij                       | p Code         |  |
|  |   |                                   |   | •        |               | rporation submits this statement for the   | FL  |                              |                |  |
| SIGNATURE                                    | m familiar with, and accept the of Signature typed or proted name of registered |                                   |   |          |               | uired when reinstating)  | DATE  | J                            |                |  |
| 12.  |   |                                   | 13.                                     | 13.      |               | ADDITIONS/CHANGES TO OFFI  | CERS AND  |                              |                |  |
| TITLE  | D DE  |                                   | 111111                                  | .€       |               |  |   | Change                       | e 🔲 Additio    |  |
| NAME   | THORESEN, THORE   |                                   | 1.2 NAN                                 | ΛE       |               |  |   |                              |                |  |
| STREET ADDRESS                               | 3961 SW 32ND AVE  |                                   | 13 STR                                  | HΕΓ      | ADDRESS       |  |   |                              |                |  |
| CITY-ST-ZIP                                  |   |                                   | 140114                                  |          | T - ZIP       |  |   |                              | P-1            |  |
| TITLE  |   | ∐ DETETE                          |   | 21 TITLE |               |  |   | Change                       | Addition       |  |
| NAME   |   |                                   | 2.2 NAM                                 |          |               |  |   |                              |                |  |
| STREET ADDRESS                               |   |                                   |   |          | ADDRESS       |  |   |                              |                |  |
| CITY-\$T-ZIP                                 | DELETE  |                                   | 2.4 CITY-ST-ZIP<br>3 1 TITLF            |          | 51 - ZIP      |  |   | Change                       | Additio        |  |
| NAME   |   | C) peccie                         | 3.2 NAME                                |          | ľ             |  |   | Onlings                      | , La ridonio   |  |
| STREET ADDRESS                               |   |                                   |   |          | ADDRESS       |  |   |                              |                |  |
| CITY-ST-ZIP                                  | •   |                                   | 3.4. C(1                                |          |               |  |   |                              |                |  |
| TITLE  |   | DELFTE                            | 4.1 TiTL                                |          | 2"            |  |   | Change                       | a Additio      |  |
| NAME   |   |                                   | 4. 2 NA                                 |          |               |  |   | ·                            |                |  |
| STREET ADDRESS                               |   |                                   | 4.3 S1R                                 | EET      | ADDRESS       |  |   |                              |                |  |
| CITY-ST-ZIP                                  |   |                                   | 4.4 CHY                                 | Y- S1    | T - 7IP       |  |   |                              |                |  |
| TITLE  |   | DELETE                            | 5.1 TITE                                | F        |               |  |   | Change                       | Addition       |  |
| NAME   |   |                                   | 5.2 NAM                                 | JΓ       |               |  |   |                              |                |  |
| STREET ADDRESS                               |   |                                   | 5.3 S1R                                 | EET      | ADDRESS       |  |   |                              |                |  |
| CITY-ST-ZIP                                  |   |                                   | 5.4 CITY                                |          | T-ZIP         |  |   | <del></del>                  |                |  |
| TITLE  | }   | DELETE                            | 6.1 1011                                | l f      |               |  |   | L Change                     | e L Additio    |  |
| NAME   |   |                                   | 6.2 NAN                                 | ΛĖ       |               |  |   |                              |                |  |
| STREET ADDRESS                               |   |                                   |   |          | ADDRESS       |  |   |                              |                |  |
| CITY - ST - ZIP                              |   | 1 - 1 - 24 - 21 - 22              | 64001                                   |          |               |  |   |                              |                |  |
| Informatic                                   | Indicated on this annual conort   | or europlemental annual report is | dring and ac                            | 0011     | irate and the | ed in Section 119.07(3)(i), Florida Statut<br>al my signature shall have the same leg<br>ort as required by Chapter 607, Florida   | al affact as  | if made i                    | indor oath: th |  |