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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

CUMENT #

	OTRON, INC.	0031369 (5)			
Principal Plac	e of Business	Mailing Address		T RODANDEL AND THIND SELECT SOLET SOLET SOLET	DA 21184 11881 BITOR BIOSA EDIS 1845
1000 W. MCNAB ROAD 1000 W. MCNAB ROAD					
STE. 206		STE. 206		DO NIOT WESTER IN THIS SPACE	
POMPANO BEACH FL 33069		POMPANO BEACH FL 33069 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
US		Uõ		04/30/1993	1
2. Principal P	Place of Business	26. Mailing Address		4. FEI Number	Applied For
21		26 287 N.W. 1	11749 Way	65-0415550	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		\$8.75 Additional
22		27		5, Certificate of Status Desired	Fee Required
City & Stat	е	City & State	. ~/	6. Election Campaign Financing	\$5.00 May Be
23		28 (OVA) SP1	1495, FC	Trust Fund Contribution	Added to Fees
Zip	Country	7φ	Countly	8. This corporation owes or has paid the o	
24	25	29 3307/ 3	O USA	Personal Property Tax due June 30.	Yes No
				10. Name and Address of New Registere	a Agent
AUXERMAN, ERIU				ric S. Ackernan	
1000 W. MCNAB ROAD 82 Street Address				dress (P.O. Box Number is Not Acteptable)	
STE. 206 287 /				10.00.111	
FOMPANU DEACH FL 33008					
84 City Cor					
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 registered registered upon 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.					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
SIGNATURE CYT'C TUTCHAN 4/28/98 Signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	Р	DELETE	1.1 TITLE		Change Addition
NAME	ACKERMAN, ERIC S		1.2 NAME		
STREET ADDRESS	1000 W. MCNAB ROAD		1,3 STREET ADDRESS		1
CITY-ST-ZIP	POMPANO BEACH FL 33069		1.4 CITY - ST - ZIP		<u></u>]
TITLE	VP	□ OŁLETE	2.1 TITLE		Change Addition
NAME	SANCHEZ, JOSE		2.2 NAME		
STREET ADDRESS	1000 W. MCNAB ROAD		23 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33069	Perser	2 4 CiTY - ST - ZiP		T Access To Access
TITLE	ST SUIS SUIS	₩ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	EDIP, EUGENE		3.2 NAME		
STREET ADDRESS	1000 W. MCNAB ROAD		3.3 STREET ADDRESS		
CITY - ST - ZIP	POMPANO BEACH FL 33069	DETETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		₩ DECTE	4.1 THE		LI CHANGE LI MUDEION
NAME CARCAL ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CHY-ST-ZIP 5.1 TITLE		Change Addition
NAME	}	L_I DOWN	5.2 NAME		orange radicoll
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		-
STREET ADDRESS			6.3 STREET AUDRESS		
CITY ST. 7IP			6.4 City, St. 7iP		

14. Thereby 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 supplied into the content of the corporation of the corporation of the corporation of the corporation of the recovered frusterparameter 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 our an attachment with an address.