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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P93000033445 (6)

TELECRAFT, INC.

FILED
Jan 16 1998 8:00am
Secretary of State

IELEC	HAPI, INC.				I 1381/1861 MJD 18/08 MJM BRAN BRAN ABAN ABAN ABAN	IPPOR IPPOR RIBOR RIBOR AND HORE
Principal Plac	ce of Business	Mailing Address			i iantindt tid idide litte anter netti Abrit dates	iirka iibli Aifili araal arii isar
101 OLD FEE	RRY ROAD	101 OLD FERRY ROAD				
UNIT 17-C		UNITE 17-C SHALIMAR FL 32579		DO NOT WRITE IN THI	S SPACE	
SHALIMAR FL 32579 US		US		3. Date Incorporated or Qualified	3 61 AGE.	
					05/06/1993	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			03-0336239	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			S. Certinodic or otatios scored	Fee Required
City & Stat	de .	City & Stato			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cour	ıtry	8. This corporation owes or has paid the o	current year Intangible X Yes No
24	25 9. Name and Address of Curren	[29]	30		Personal Property Tax due June 30. 10. Name and Address of New Registere	
DA		it Hegiotorea Agent		81 Name	IV. Maine and Address of New Hegisters	u Agont
10	krnett, janet 1 old Ferry RD.		1			
			82 Street	Address (P.O. Box Number is Net Acceptable)		
1	T. 21-C IALIMAR FL 32579		-	83		
91	IALIMAN FL 323/8					
			1	B4 City	F	85 Zip Code
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statute	es. The ab	ovc-named		
office or a	registered agent, or both, in the State am familiar with, and accopt the obliga	of Florida, Such change was a	uthorized	by the con	corporation submits this statement for the purpose noration's board of directors. I hereby accept the a	ppointment as registered
i	an amiliar with and accopt the obligation		CHETT		e-PALSIPE -5 5	47 98
SIGNATURE	Signature, typed or printed hand of registered age		Registered	Agent signature	required when reinststing) DATE	
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DPT	☐ DELETE	1.1 111	.F		Change Addition
NAME	BARNETT, FREDERICK E.		1.2 NA	ME		
STREET ADDRESS	101 OLD FERRY RD., APT. 21	1∙C	1.3 S1F	EET ADDRESS		្រំ
CITY-S1-ZIF	SHALIMAR FL		1.4 CIT	Y-S1-7/P		
111LE	VS	DELETE	2.1 1(1)	.F		Change Addition
NAME	BARNETT, JANET		2.2 NAI	NE		
STREET ADDRESS	101 OLD FERRY RD., APT. 21	1-C		EFT ADDRESS		
CITY-ST-ZIP	SHALIMAR FL			Y-\$1-7IP		
TITLE		DELETE	3 1 1111	· ·		☐ Change ☐ Addition
NAME			3 2 NAI			
STREET ADDRESS				EFT ADDRESS		
CHTY-ST-ZIP		DELETE		Y·ST-ZIP		Change Addition
TITLE	1	☐ DEFLIC	4,1 (0)			ET CHAIRGE ET MODITION
NAME DEDEST ADDRESS			4. 2 NA			
STREET ADDRESS				EFT ADDRESS		
CITY-ST-ZIP		DEFFIE	4.4 CIT	Y-\$1-ZIP		Change Addition
TITLE		□ Milit				
NAME OTDEET ADVOCCE			5.2 NA			
STREET ADDRESS				REET ADORESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CH	Y-S1-ZIP E		Change Addition
NAME		La presse	6.2 NA			
STREET ADDRESS	[TET AUDRESS		
City-St-Zip				Y-ST-7IP		
	I .		V.7 V/		1	

14. I hereby 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 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. OF BUY BUY ST JANET BARNETTUKE PRESE

(JANET BARNETTUKE PRESNENT & JAN97 850 6518935