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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000053854 (4)

ELECTRONIC EQUIPMENT SPECIAL SERVICES, INC.

							EL BIOLION
	ce of Business	Mailing Address					
4027 NW 24TH ST. Miami Fl 33142 US		4027 NW 24TH ST. Miami Fl 33142-6715 US					
					3. Date Incorporated or Qualified 07/30/1993	3a. Date of Last 04/08/1996	Report
L	Place of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21		26			65-0425405	N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
22		27			6. Certificate of States Pesifical	Fee F	lequired
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution Added to Fees			
Zip 24	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
24	25 29 30 9, Name and Address of Current Registered Agent		30	Florida Statutes Yes No 10. Name and Address of New Registered Agent			
		n Hegistered Agent	81	Name	10, Name and Address of New Re	Bisteled Wash	
	EIN, DONALD M		*'	Martie			,
	KLINE MOORE & KLEIN P.A.	•	82	Street Add	ress (P.O. Box Number is Not Acceptab	ie)	
	85 S. BAYSHORE DR., SUITE 903	j	83				······
60	CONUT GROVE FL 33133		[63]				
			84	City		FL 85 Zip	Code
de During	to the standard of Cooling CO7 050	22 and CO2 1509 Florido Ctatu	the the ebesse	Company and	position submits this statement for the s		ite togistated
office or	registered agent, or both, in the State	of Florida. Such change was	authorized by	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	ot the appointment a	s registered
agent I.	am familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statutes				
SIGNATURE							
	Signature, typed or printed name of registered ag		13.	nt signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DC IN 10
12.			1.1 TOTALE		ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	RADELL, GEORGE	- Dettin	1.2 NAME			Change Contract	L. Hoditon
STREET AUDRESS	ADDA NIM DATH OT						
' ' '	MIAMI FL 33142		1.3 STREET ADDRESS				
CHY-SI-7#	D	DELETE	1.4 CITY-SI 21 TITLE	- ZIP		Change	Addition
TITLE	RADELL, GREGG		1			LJ Crange	L HOUSE
NAME	4027 N.W. 24TH ST.		22 NAME				
STREET ADDRESS	MIAMI FL 33142		2.3 STREET ADDRESS				
C(1Y - S1 - 7/P	D D	DELETE	2.4 CITY-S	T- ZIP		Change	Addition
TITLE	RADELL, DANA	T Dereit	3.1 TITLE			C Cuantic	□ Nantion
NAME.	AND MIN OUTL OF		3.2 NAME				
STREET ADDRESS	MIAMI FL 33142		3.3 STREET	- 1			
CHY-ST-ZIP	MIAMI FL 33142	DELETE	3.4. CITY - S	T-ZIP		Change	Addition
TITLE		☐ nere te	4.1 TITLE			Change	Addition
NAME	1		4. 2 NAME	- 1			
STREET ADDRESS			4.3 STREET				
CITY-ST-7IP		T be see	4.4 CITY - ST	- ZIP		T 7 8:	Liver
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS	REFT ADDRESS :		53 STREET	Address			
City-St-79			5.4 CiTY+S ¹	r- 2(P			
TITLE	DELETE 6.1		6.1 TITLE			Change	Addition

6.2 NAME

5.3 STREET ADDRESS
CITY - \$1-20

14. I do 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 attainment with an address.

SIGNATURE:

NAME STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/93

(305) 871, 1500

FILED

Apr 22 1997 8:00am

Secretary of State

Daytime Frione #