## 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

## P93000079772 (8) DOCUMENT #

NATIONWIDE ELECTRONICS, INC.

Principal Place of Business Mailing Address 4400 HILLSBORO BLVD. 4400 HILLSBORO BLVD. SUITE #3 SHITE #3 DO NOT WRITE IN THIS SPACE COCONUT CREEK FL 33073 **COCONUT CREEK FL 33073** 3. Date Incorporated or Qualified 11/18/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0449398 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Cortificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zιρι Country 8. This corporation owes or has paid the current year Intangible Zip X Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SCHNEIDERMAN, AUDREY B 2101 CORPORATE BLVD NW 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 204 83 **BOCA RATON FL 33431** 84 City Zip Code 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 agent, or both, in 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 SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typed or pouled name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITLE SCHNEIDERMAN, LEWIS M 1.2 NAME NAME 4381 TREVICT 1.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33467 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE MARKS, ALAN 22 NAME NAME 2403 NW 35TH ST 23 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP 2 4 CITY - ST - 7IP DELETE Change Addition 31 1111 THILE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. C/TY - ST - Z/P CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 7/P CHY-ST-ZIP Change Addition DELETE 5.1 THUE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY- ST - 7IP CHTY-ST-ZIP Change Addition DELETE 6.1 THLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

**FILED** Jan 20 1998 8:00am Secretary of State



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 supplemental annual report is true and accorate 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 954-429-0606

CITY-ST-ZIP

Block 12 or Block 13 if changed, or on an authoriment with an address