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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

(Amended)

DOCUMENT # P93000084251

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

Light Circuit Braker, Inc.

Principal Place of Business	Mailing Address
2134 N.W. 99th. Ave. Miami, FL. 33172	2503 S.W. 27th. Ave Miami, FL. 33133

3. Date Incorporated or Qualified: Dec. 3, 1993

3a. Date of Last Report: 1996

2. Principal Place of Business	2a. Mailing Address
21 2134 N.W. 99th.Ave.	26 2503 S.W. 27th.Ave.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Miami, FL.	28 City & State: Miami, FL.
24 Zip: 33172 25 Country: U.S.	29 Zip: 33133 30 Country: U.S.

4. FEI Number: 65-0488466 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Angel F. Condom 2134 N.W. 99th. Ave. Miami, FL. 33172	81 Name: Oscar Vila-Masot 82 Street Address (P.O. Box Number is Not Acceptable): 2503 S.W. 27th. Ave 83 84 City: Miami FL 85 Zip Code: 33133

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: OSCAR VILA-MASOT, Ph.D. (Signature, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) DATE: 10/25/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P/D NAME STREET ADDRESS CITY-ST-ZIP	President and Director ☐ DELETE Angel F. Condom 2134 N.W. 99th. Ave. Miami, FL. 33172	1.1 TITLE P/D 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Presidentand Director ☒ Change ☐ Addition Oscar Vila-Masot 2503 S.W. 27th. Ave. Miami, FL. 33133
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ DELETE Frank Condom 2134 N.W. 99th. Ave. Miami, FL. 33172	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition 400001998514---8 -11/07/96--01025---010 *****61.25 *****61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE V/P 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Executive Vice Pres. ☐ Change ☒ Addition Angel F. Condom 2134 N.W. 99th. Ave. Miami, FL. 33172
TITLE T/S/D NAME STREET ADDRESS CITY-ST-ZIP	Treasurer, Sec. & Dir. ☐ DELETE Dr. Jose R. Gomez 11 E. Dilido Drive Miami Beach, FL. 33139	4.1 TITLE T 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Treasurer ☒ Change ☐ Addition Dr. Jose R. Gomez 11 E. Dilido Drive Miami Beach, FL. 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE S/D 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Secretary and Director ☐ Change ☒ Addition Javier Vila 2503 S.W. 27th Ave. Miami, FL. 33133
TITLE V.P/D NAME STREET ADDRESS CITY-ST-ZIP	Vice-Pres.& Director ☐ DELETE Dr. Angel Prado 2134 N.W. 99th. Ave. Miami, FL. 33172	6.1 TITLE V.P. 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Vice- President ☒ Change ☐ Addition Dr. Angel Prado 2134 N.W. 99th. Ave. Miami, Fl. 33172

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Vila, President — 10/25/96 (305) 856-5222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #