

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000003202 (6)

1. Corporation Name

ELECTRODES DESIGN AND MACHINE, INC.

Principal Place of Business

12650 AUTOMOBILE BLVD
CLEARWATER FL 34622
US

Mailing Address

12650 AUTOMOBILE BLVD
CLEARWATER FL 34622
US



2. Principal Place of Business
21 6281-39th ST N
Suite, Apt. #, etc.
22 Unit G
City State
23 PINELLAS PARK FL
Zip Country
24 34665 25 US

2a. Mailing Address
26 6281-39th ST N
Suite, Apt. #, etc.
27 Unit G
City State
28 PINELLAS PARK FL
Zip Country
29 34665 30 US

9. Name and Address of Current Registered Agent

DANIELS, FREDRICK A
656 40TH AVE. NE
ST. PETERSBURG FL 33703

3. Date Incorporated or Qualified
01/06/1994

3a. Date of Last Report
04/13/1995

4. FEI Number
59-3216462

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. 190.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 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

Signature, type or print name of registered agent and state the position

Signature, type or print name of registered agent and state the position

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-STATE-ZIP	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY-STATE-ZIP	9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY-STATE-ZIP	13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY-STATE-ZIP	17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY-STATE-ZIP
	DP			☐ DELETE															
	DANIELS, FREDRICK A			☐ DELETE															
	656 40TH AVE. NE			☐ DELETE															
	ST. PETERSBURG FL 33703			☐ DELETE															

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-STATE-ZIP
				☐ Change ☐ Addition																			
				☐ Change ☐ Addition																			
				☐ Change ☐ Addition																			
				☐ Change ☐ Addition																			

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)(a), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

#496

813

CR2E034 (12/95)