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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P94000023257

Secretary of State **DIVISION OF CORPORATIONS**

FILED May 01, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris 05-01-1999 90016 047 ***150.00

	COMPONENTS, INC.								
Principal Place	e of Business	Mailing Address		•		- 1 130(180(1310 10)(100)(100)(100)(100)(100)(100)		III a i ari	(f 1881 1881
1420 NW BOCA	A RATON BLVD	-2120-CHERWOOD-BLVD:							
#3	· · · · · · · · · · · · · · · · · · ·	-DELRAY BEACH FL 33433	-						
BOCA RATON FL 33432						DO NOT WRITE IN THIS SPACE			
US						3. Date incorporated or Qualifed			Ì
						03/25/1994		,	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	<u> </u>		ed For
21		26			-	65-0481056			pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired ` □			ditional
22		27						Requ	
City & Stat	e	City & State				6. Election Campaign Financing	7	00 м	,
23		28				Trust Fund Contribution	Add	ded to I	ees
— Zip	Country	Zip		intry		8. This corporation owes the current year in	_	Ą	/ I
24	25	29	30	_		Personal Property Tax.	Yes	<u>_</u> 4	ĨNo
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered	Agent		———
MAN	INIC ALLAN			""	NATITE				
MANNIS, ALLAN 1420 NW BOCA RATON BLVD				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
,	NW BOCK RATON BLVD								
#3	A DATON EL COACO			83					
BÚC	CA RATON FL 33432			84	City		85	Zip Co	de
				1	-	ration submits this statement for the purpose of	-	·	
agent. I a SIGNATURE	m familiar with, and accept the obligation of registered ager	tions of, Section 607.0505, Flo	onda Stat	utes.	t signature required	n's board of directors. I hereby accept the appo			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	S IN 12
TITLE	PD	☐ DELETE	1.1 TI	TLE			☐ Cha	nge	☐ Addition
NAME .	MANIS, ALLAN		1.2 N	AME	į				1
STREET ADDRESS	12428 CLEAR FALLS DR				ADDRESS				Į
ÇITY-ST-ZIP	BOCA RATON FL 33428		1.3 S	TREET					
TILE				TREET. ITY+ST:					
		☐ DELETE		ΠΥ∙S <u>T</u>			☐ Cha	nge	Addition
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CITY-ST-ZIP 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 chapted or on an attachment with an address, with all other like empowered.

SIGNATURE