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

PROFIT **CORPORATION ANNUAL REPORT**

1998

NOVO. CARLOS M 6844 N.W. 75 STREET

MIAMI FL 33166



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000032416 (7)

9. Name and Address of Current Registered Agent

NOVOS ELECTRONIC CONTRACTORS INC.

Principal Place of Business Mailing Address **6844** N.W. 75 STREET 6844 N.W. 75 STREET MIAMI FL 33166 MIAMI FL 33166 3. Date Incorporated or Qualified 04/28/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0576749 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible K Yes 24 29 30 Personal Property Tax due June 30.

FILED Apr 29 1998 8:00am Secretary of State



10. Name and Address of New Registered Agent

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

Applied For

□ No

Zip Code

Not Applicable

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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PSTD DELETE Change TITLE 1.1 TITLE NOVO, CARLOS M NAME 12 NAME 6844 N.W. 75 STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition PADILLA, CARLOS H NAME 2.2 NAME **6844 N.W. 75 STREET** STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition Channe TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4, CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 64 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 Appliemental 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 recover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

ment with an address.

81

83

Name