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

Mailing Address

5800 COLLINS AVE

CORPORATION ANNUAL REPORT

1997

Principal Place of Business

8600 COLLINS AVE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400036790 (1)

POWER LINE ELECTRONICS, INC.

Pate Incorporated or Qualified 5/16/1994		3a. Date of Last Report 05/01/1996				
El Number 65-0490024		.]	Applied For Not Applicable			
Certificate of Status Desired		\$8.75 Additional Fee Required				
lection Campaign Financing rust Fund Contribution			5.00 May Be			
his corporation has liability for lorida Statutes	Yes	☐ No				
D. Box Number is Not Acceptat		i Ageni				
		lar	Zıp Code			
submits this statement for the p	FL	85 of chan				
ard of directors. I hereby accept	pt the ap	pointm	ent as registered			

FILED

May 09 1997 8:00am

Secretary of State

5-E Miami Beach Us	FL 33140	5-E Miami Beach Fl 33140-2 US	455		3. Date Incorporated or Qualified 05/16/1994	3a. Date of Last Report 05/01/1996
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0490024	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	6	' City & State			6. Election Campaign Financing	\$5.00 May Be
23		[28]			Trust Fund Contribution	Added to Fees
Zip	Country 7ip Country		ry	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	[29]	30			Yes No
· NIAA	g. Name and Address of Cur	rent Hegistered Agent	8	1 Name	10. Name and Address of New Reg	ilstered Agent
	HELSKI, EDUARDO R		ľ	Name		
5-E	COLLINS AVE		8:		dress (P.O. Box Number is Not Acceptabl	e)
MIAIM	MI BEACH FL 33140		8	3		
			8	4 City		FL 85 Zip Code
office or r	to the provisions of Soctions 607.0 egistered agent, or both, in the St in familiar with, and accept the ob-	ate of Florida. Such change was	authorized b	ov the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accept	urpose of changing its registered the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered	agent and title if applicable. (NO AND DIRECTORS		gont signature req	uired when reinstating)	DATE
12.	D OFFICERS I	AND DIRECTORS DELETE	13. 1,1 TITLE	Th:	ADDITIONS/CHANGES TO OFFICE	ERS AND DIBECTORS IN 12 Change Addition
NAME	nasilieski, eduardo r	C DELETE	1.1 HILE 1.2 NAME	A/	ASIELSKÍ EDUARDO	A Pusitis T Vocition
STREET ADDRESS	5600 COLLINS AVE			ET ADDRESS	1250 NW 59 TEARA	100
CITY-ST-ZIP	MIAMI BEACH FL 33140			CL JUD ALL	1200 NW 37 1821CA	ice
TITLE		DELETE	1.4 CITY 2.1 TITLE		111 FC 32170	Change Addition
NAME			2.2 NAM			L. Shango L. Hoomen
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			2.4 CITY			
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	:		
STREET ADDRESS			3.3 STRE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY	-ST-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	E		
STREET ADORESS	,		4.3 STHE	T ADDRESS		
CITY-ST-ZIP			4.4 CiTY-	į.	•	
TITLE		DELETE	51 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREE	T ADDRESS		
CITY-ST-ZIP	The second second		5.4 CITY			
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			·
STREET ADDRESS				T ADDRESS		

14. I do 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 frue 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 change or or or an attachment with an address.

M-20-91