FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000039624 (9)**

1. Corporation Name

GRADIENTE ELECTRONICS INC.

Principal Place of Business

2655 LE JEUNE ROAD, SUITE 1107
CORAL GABLES FL 33134

Mailing Address

2655 LE JEUNE ROAD, SUITE 1107
CORAL GABLES FL 33134

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. # etc.
27
City & State
28
Zip 29 County 30

3. Date Incorporated or Qualified: **05/23/1994**

3a. Date of Last Report: **05/23/1995**

4. F.E.I. Number: **65-0500067** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Enclosed ☐ **$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

MIR, HECTOR J
2655 LE JEUNE ROAD, SUITE 1107
CORAL GABLES FL 33134

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 607.0505 and 607.1505, 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

12. OFFICERS AND/OR DIRECTORS

TITLE D
NAME **FILHO, EUGENIO E.S.**
STREET ADDRESS **RUA DR. FERNANDES COELHO, 64**
CITY-ST-ZIP **SAO PAULO - S.P. 05423-911 BRAZ.**
☐ DELETE

TITLE
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CITY-ST-ZIP
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13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

1 TITLE
1 NAME
1 STREET ADDRESS
1 CITY-ST-ZIP
☐ Change ☐ Addition

2 TITLE
2 NAME
2 STREET ADDRESS
2 CITY-ST-ZIP
☐ Change ☐ Addition

3 TITLE
3 NAME
3 STREET ADDRESS
3 CITY-ST-ZIP
☐ Change ☐ Addition

4 TITLE
4 NAME
4 STREET ADDRESS
4 CITY-ST-ZIP
☐ Change ☐ Addition

5 TITLE
5 NAME
5 STREET ADDRESS
5 CITY-ST-ZIP
☐ Change ☐ Addition

6 TITLE
6 NAME
6 STREET ADDRESS
6 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing, and any corrections to information previously filed with this report, is true and accurate and that this report is executed in accordance with Section 607.0120(5), Florida Statutes. I further certify that the information indicated on this report or supplemental 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: E. Staub EUGÊNIO E. STAUB FILHO **03/25/96** (305) 444-0460

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number

CR2E034 (12/95)