**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P94000048685 (9)

## **ELECTRONICS UNIVERSE CORP.**

Principal Place of Business Mailing Address 50 BISCAYNE BLVD 50 BISCAYNE BLVD



MIAMI FL 33132		MIAMI FL 33132							
						3. Date Incorporated or Qualified 06/29/1994	3a. Date	of Last F	•
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	- <del></del>		Applied For
21		26			65-0501712			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		<b>+</b>	5 Additional Required	
City & State		City & State				6. Election Campaign Financing		\$5.0	00 May Be
23		28				Trust Fund Contribution			ed to Fees
Zip	Country	Country Zip Country			8. This corporation has liability for	intangible ta	x under s	199.032,	
24	[25]	29	30	<b>,</b>		Florida Statutes	X-		
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	glatered	Agent	
				61	Name	<i>'</i>			
	I, JULIO C PAYNE BLVD		62 Street Addr		Street Addre	ess (P.O. Box Number is Not Acceptat	ole)		······································
	AYNE BLVD			83					
MIAMI F	L 33132			24					
				84	City		FL	<b>85</b> Z	'ip Code
familiar with	nd agent, or both, in the State of Ficric n, and accept the obligations of, Sect Sprature, typed or printed name of registered agent	da Such change was authori ion 607,0505, Florida Statute	zeo by the c	corpo	ration's board	ation submits this statement for the pur d of directors. I hereby accept the app	ointment as	registere	d agent. I am
12.	OFFICE'RS ANI		13.	regent	agriato e respirito	ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	OBS IN 12
TITLE	DP	DELETE	1.17	ITLE				Change	<del></del>
NAME	PEREDA, JULIO C		1.2 N/	AME			_		
STREET ADDRESS	225 POCATELLA ST		1.3.51	IREET A	ADDRESS				
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		. E	IIY-SI					
TITLE	DST	DELETE	2.17				Г	Change	Addition
NAME	PEREDA, RICARDO		2.2 NA	AME			-	_ •	
STREET ADDRESS	225 POCATELLA ST		2351	IREET A	ADORESS				
CITY-ST-ZP	MIAMI SPRINGS FL 33166		2.4 CITY- SY-ZIP		- ZIP				
TITLE		DELETE	3 1 TITLE				Ē	Change	☐ Addition
NAME			3.2 N	AME					
STREET ADDRESS			3.3 S	TREET.	ADDRESS				
CITY-ST-ZP			3 4 CI	TY-\$7	- <b>71</b> P				
TITLE		DELETE	4.11	ITLE			[	] Change	Addition
NAME			4.2 N	AME					
STREET ADDRESS			4351	TREET A	ADDRESS				
CITY-ST-ZP			4.4 CI	TY-\$T	- ZIP				
THILE .	DELETE		5 1 1	5 1 TITLE				Change	Addition
NAME			5.2 NA	AME					
STREET ADDRESS			5 3 ST	TREET A	ADDRESS				
CITY-ST-ZP			5.4 C)	TY-SI	-7IP				
THILE		DELEAS	6 1 TI					Change	Addition
NAME		/ //	62 N/	4ME					
STREET ADDRESS		. / //	6.3 ST	REETA	ADORESS				
CITY-ST-ZIP				TY-ST					
certify that I	certify that the information supplied the information indicated on this am an officer or director of the first table to the first table to the first table t	al repower a Japolemental ani	nua: recort i:	s true	e and accurati	or the exemption stated in Section 119, e and that my signature shall have the report as required by Chapter 607, Fk	same legal.	offont ac-	if mede under

**SIGNATURE** 

appears in Block 12 or Block

RINYED NAME OF SIGNING OFFICER OR DIRECTOR