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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400067796 (0)

TEAM ELECTRONICS, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			State 18812 18610 16110 Bibl 1881
609 TRINIDAD CT.	TRINIDAD CT. TER PARK FL 32792 809 TRINIDAD CT. WINTER PARK FL 32792			
WINTER PARK FL 32792			DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	JOI NOE
			09/07/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 125 Olympic Club CT. Suite, Apt. #, dc.	26 /25 Olymp Suite, Apt. #, etc.	ic Club Ci	59-3278173	Not Applicable
	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22	27		6. Certificate of status Desired	Fee Required
City & State	City & State	,	Election Campaign Financing	\$5.00 May Be
23 Orlando, FL	28 Orlande, 1-	<u></u>	Trust Fund Contribution	Added to Fees
Zip Country 24 32828 25 USA	21p 29 32828 30	Country	8. This corporation owes or has paid the c	
24 323 25 U 5 17 9, Name and Address of Curren		USA	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes X No
POOLE, WILLIAM F IV	. Trogiotico zagoni	81 Name	10. Humb and Address of frem negletere	1 villagett
644 W. COLONIAL DR.				
ORLANDO FL 32804		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
CHARLES I E DEUCT		83		
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the above-named co	rogration submits this statement for the nurnose	of changing its registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga	of Florida. Such change was auth	orized by the corpor	ation's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	110100 or cooled out 10000, 110100	a olatatos.		
Signature, typed or printed name of registered ager	nt and title if applicable (NOTE, Re	gistered Agent signature req	uired when reinstating) DATE	
12, OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TIFLE D	☐ DELETE	1.1 TITLE		Change
NAME TORRE, PATRICK		1.2 NAME		
STREET ADDRESS 900 TRIMIDAD OT.		1.3 STREET ADDRESS /	25 Olympic Club Ct. ORLANDO, FL 92828	
CITY-ST-ZIP WINTER PARK FL 92792	Document	14 CITY-ST-ZIP C	RLANDO, FL 32.82.8	
TITLE	DELETE	21 TITLE		L Change L Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	☐ DELETE	2. 4 CITY - S1 - ZIP 3.1 TITLE		Change Addition
NAME	C perrie	3.2 NAME		CH CHOUSE CT MUNICIPAL
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS	į	4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 DITY-ST-ZIP		j
TITLE	☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME .		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	☐ DELET e	6.1 TITLE	11-3	☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS	ľ	6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		
 I hereby certify that the information supplied wit 	h this filmo does not qualify for the	e exemption stated is	ri Section 119 07(3Vi). Florida Statutos, Lifurther o	artify that the information

6. I needly certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 changed, or on an attachment with an address.

CICALATURE.

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