SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name P94000079019 (3)

CUI, INC.

FILED Sep 30 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			0 0110 10010 10111 0 0101 11018 1011 1001
11325 WOODSONG LOOP NORTH JACKSONVILLE FL 32225 11325 WOODSONG LOOP N JACKSONVILLE FL 32225		IORTH		
			DO NOT WRITE IN	THIS SPACE
			 Date Incorporated or Qualified 09/09/1994 	·
2. Principal Place of Business	2a. Mailing Address	~4 ()	4. FEI Number	Applied For
21 1905 NW 5th Ave	26 1905 NW	5th Hve	59-3257524	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		o. Commond of Claras Dogitor	Fee Required
City & State	City & State		6. Election Campaign Financing	, \$5.00 May Be
23 Gainesville, FL	28 Gainesville		Trust Fund Contribution	Added to Fees
Zip Country 25 USA		Country 30 USA	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
GREEN, JANICE W 1325 WOODSON LOOP NORTH				
11325 WOODSONG LOOP NORTH			ess (P.O. Box Number is Not Acceptable)	-
JACKSONVILLE FL 32225			5 NW 5th Ave	
		83		
		84 City/)		85 Zin Code
B4 City Bainesui			resuille	FL 32603
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				
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	
ADPEN HARAE W	L DELETE	1.1 TITLE	Ø	Change Addition
STREET ADDRESS 11325 WOODSONG LOOP NORT	ш	1.2 NAME G	rreen, Janue W 905 NW 5th Ave ainesuille, FL 326	
INDVOORIGHTE EL GOOGE	"	1.3 STREET ADDRESS	405 NW 5th Ave	
TITLE		1.4 CITY-ST-ZIP	ainesuille, FL 326	
NAME	L DELETE		·	Change Addition
		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
City-St-ZiP		2.4 CITY-ST-ZIP		
NAME	L DELETE	3.1 TITLE		Change Addition
STREET ADDRESS		3.2 NAME		
CITY-ST-ZIP		3.3 STREET ADDRESS		
TITLE	Decree	3.4 CITY-ST-ZIP		
NAME	L_] DELETE	4.2 NAME		L Change L_ Addition
STREET ADDRESS		4.3 STREET ADDRESS		i
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		
NAME	☐] NECELE	5.2 NAME		L_ Change _ Addition
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-Z#P				
TITLE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Observed A 1 con
NAME	Γ □ N£ Γ Ε Ι Ε	6.2 NAME		Change Addition
STREET ADDRESS		6.3 STREET ADDRESS		
		4'2 SILEE I WORKESS		•
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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.

9-20-98