FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 8:30

DOCUMENT # **P94000082907 (4)**

1. Corporation Name
PELCO CORP.

Principal Place of Business	Mailing Address
C/O WENDY ANDERSON, P.A. 390 N ORANGE AVE SUITE 1300 ORLANDO FL 32801	C/O WENDY ANDERSON, P.A. 390 N ORANGE AVE SUITE 1300 ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/14/1994
3a. Date of Last Report: N/A

2. Principal Place of Business	2a. Mailing Address
21 24200 CHAGRIN BLVD.	26 C/O SANDFORD WASSERSTROM 24200 CHAGRIN BLVD.
22 Suite, Apt. #, etc.: 237	27 Suite, Apt. #, etc.: 237
23 City & State: BEACHWOOD, OH	28 City & State: BEACHWOOD, OH
24 Zip: 44122 — 25 Country	29 Zip: 44122 — 30 Country

4. FEI Number: 58-2142649 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $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	10. Name and Address of New Registered Agent
WENDY ANDERSON, P.A. 390 N ORANGE AVE SUITE 1300 ORLANDO FL 32801	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 607.0502 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: _____ (Typed or printed name of registered agent and title if agent is a corporation) (New Registered Agent's signature required for new agent) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	SIEGAL, MICHAEL	12 NAME	
STREET ADDRESS	5060 RICHMOND RD	13 STREET ADDRESS	
CITY-ST-ZIP	BEDFORD HEIGHTS OH 44124	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	SIEGAL, SOL	22 NAME	
STREET ADDRESS	5060 RICHMOND RD	23 STREET ADDRESS	
CITY-ST-ZIP	BEDFORD HEIGHTS OH 44124	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	WASSERSTROM, SANFORD	32 NAME	
STREET ADDRESS	24200 CHAGRIN SUITE 237	33 STREET ADDRESS	
CITY-ST-ZIP	BEACHWOOD FL 44122	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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: Sandford Wasserstrom Treasurer — 3/24/95 — (216) 831-8840
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #