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Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90107 023 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000089797

1. Corporation Name

S.T. ELECTRONICS, INC.

Principal Place of Business

**9472 SW 154TH PL
MIAMI FL 33196**

Mailing Address

**9472 SW 154TH PL
MIAMI FL 33196**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/12/1994

4. FEI Number

65-0540407

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation owes the current year intangible Personal Property Tax.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**SANCHEZ, LAZARO D
10458 NW 130 ST
HIALEAH GARDENS FL 33018**

10. Name and Address of New Registered Agent

Maricela Karnib

82 Street Address (P.O. Box Number is Not Acceptable)

15423 SW 71 ST**Miami****FL****33196**

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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PCTD	☒ DELETE
NAME	SANCHEZ, LAZARO	
STREET ADDRESS	10458 NW 130TH ST	
CITY-ST-ZIP	HIALEAH GARDENS FL 33018	

TITLE	VSD	☐ DELETE
NAME	TAPANES, LUIS E	
STREET ADDRESS	9472 SW 154TH PL	
CITY-ST-ZIP	MIAMI FL 33196	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	PTSD	☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/99

305-385-1330

Daytime Phone #

CR2E034 (11/98)