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

APPROVED
AND
FILED

95 MAY -1 AM 5:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000093992 (3)

1. Corporation Name
ACTIVE ELECTRONICS, INC.

Principal Place of Business
3118 BEACH BOULEVARD
JACKSONVILLE FL 32207

Mailing Address
3118 BEACH BOULEVARD
JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/29/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 County — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 County — 30

4. FEI Number: [X] 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 [X] No

9. Name and Address of Current Registered Agent
SANDS, J. KEITH M
1551 ATLANTIC BOULEVARD #200
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent
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 _____ DATE
Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MULLIN, JAMES L JR
STREET ADDRESS	3118 BEACH BLVD.
CITY ST ZIP	JACKSONVILLE FL 32207

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 95

11 TITLE	P	[ ] Change	[X] Addition
12 NAME			
13 STREET ADDRESS			
14 CITY ST ZIP			
21 TITLE	S	[ ] Change	[X] Addition
22 NAME	SHARON P. MULLIN		
23 STREET ADDRESS	3118 Beach Boulevard		
24 CITY ST ZIP	JACKSONVILLE, FL 32207		
31 TITLE		[ ] Change	[ ] Addition
32 NAME	100001484481		
33 STREET ADDRESS	-05/11/95--01085--024		
34 CITY ST ZIP	****200.00 ****200.00		
41 TITLE		[ ] Change	[ ] Addition
42 NAME	100001484481		
43 STREET ADDRESS	-05/11/95--01085--025		
44 CITY ST ZIP	*****25.00 ****25.00		
51 TITLE		[ ] Change	[ ] Addition
52 NAME			
53 STREET ADDRESS			
54 CITY ST ZIP			
61 TITLE		[ ] Change	[ ] Addition
62 NAME			
63 STREET ADDRESS			
64 CITY ST ZIP			

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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)(k), 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: Sharon P. Mullin — 5-2-95 — (904) 399-3147
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
SHARON P. MULLIN

0002991 FP