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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000018797 (7)

K & M ELECTRONICS, INC.

Principal Place of Business Mailing Address					E SADSIADE SIN ININI NUIVI NOVI UNIVI NOVI	EDIS E \$1881 1811; 100;0 1811; 100; 1081
311-18T AVENUE NORTH 2L ST PETERSBURG FL 3370 US			3703		DO NOT WRITE II 3. Date Incorporated or Qualified	N THIS SPACE
00					03/08/1995	
2. Principal P	Place of Business	2a, Mailing Address			4, FEI Number	Applied For
21		26			59-3291298	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			\$9.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip Country		Zip Country		8. This corporation owes or has paid		
24	25	29	30		Personal Property Tax due June 3	
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Current	t Registered Agent		a []	10. Name and Address of New Regi	stered Agent
	LLIGLAN, JAMES		0	1 Name		
	10 1ST AVE. NO STE 1		8	2 Street A	Address (P.O. Box Number is Not Acceptable	1)
	HTE C112		-			
ST	PETERSBURG FL 33714		8	3		
			8	4 City		85 Zip Code
		2 -1007 4500 55 14 000				FL Color
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State (2 and 607.1508, Florida State of Florida. Such change was	ites, the abo authorized	ve-named by the corp	corporation submits this statement for the pur poration's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, F	lorida Statut	es.		
SIGNATURE						
	Other state of the	41.0	TC 6		The state of the s	DATE
12	Signature, typed or printed name of registered agen OFFICERS AND			gont signature	required when reinstating)	DATE PS AND DIRECTORS IN 12
12. TITLE	Signature, typed or printed name of registered ages OFFICERS AND		13.		required when reinstating) ADDITIONS/CHANGES TO OFFICE	
TITLE	OFFICERS AND	DIRECTORS	13. 1.1 101.6			RS AND DIRECTORS IN 12
TITLE NAME	OFFICERS AND P MILLICAN, JAMES	DIRECTORS	13. 1.1 TITLE 1.2 NAM	E		RS AND DIRECTORS IN 12
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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 that an address.

1/1/00

(813) 327-2028