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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000026356 (2)

ALL ELECTRONIC PARTS, INC.

FILED Jan 28 1997 8:00am Secretary of State



| Principal Place of Business Mailing Address 124 N STATE ROAD 434 124 NORTH STATE ROAD 43 WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 US US | | | | | · | | | | |
|---|--|--|-----------------------------|--------------|----------------------|--|--|---------------|-------------------|
| US | | US | | | | 3. Date Incorporated or Qualified 03/30/1995 | | ate of Last R | ieport |
| 2 Principal P | lace of Business | 2a. Mailing Address | | | - | 4. FEI Number | 1 00/ | 11/1996 | pplied For |
| | N. 5.R. 434 | 26 5 AM | IF. | | | 59-3314349 | | <u> </u> | ot Applicable |
| Suite, Apt. | | Suite, Apt. #, etc. | | | | | <u></u> | | Additional |
| 22 | | 27 | | | | 5. Certificate of Status Desired | | | equired |
| City & State 23 WINIE | | City & State | | | | Election Campaign Financing Trust Fund Contribution | | | May Be to Fees |
| 24 32 | 708 25 US | Zip 29 | Coui | ntry | | 8. This corporation has liability for Florida Statutes | | tax under s | . 199.032, |
| | 9. Name and Address of Curren | nt Registered Agent | | | ···· | 10. Name and Address of New Re | gistered | Agent | |
| KLIM | MBERG, HOWARD J | | | 81 | Name | | | | |
| 117 | BROOKSHIRE COURT | | ł | 82 | Street Addre | iss (P.O. Box Number is Not Acceptab | ole) | | |
| WIN | TER SPRINGS FL 32708 | | - [| | | | | | |
| \ | | | 1 | 83 | | | | | |
| | | | ł | 84 | City | | | 85 Zip | Code |
| | | | | | | | <u>FL</u> | | |
| office or r agent. La | to the provisions of sections 607,050 registered agent, or both, in the State im Miliar with, and accept the oblig | e of Florida. Such change was lations of, Section 607.0505, F | authorized Florida Stati | d by utes | the corporatio | oration submits this statement for the pon's board of directors. I hereby accept | of the app | ointment as | registered |
| SIGNATURE | muart lumy | | DAE: Department | | A alanat as as a | d when reinstating) | DATE | 1-70-1 | |
| 12. | | ent and title if applicable (NO ID DIRECTORS | 13. | Ager | r signature required | ADDITIONS/CHANGES TO OFFIC | | DIRECTOR | RS IN 12 |
| TITLE | PSD | DELETE | 1.1 ไป | LE | | 7.0071070707717102070 07710 | 2010741 | Change | Addition |
| NAME | KLIMBERG, HOWARD | | 12 NA | ME | | | | | |
| STREET ADDRESS | 117 BROOKSHIRE COURT | | 13 ST | REET | address | | | | |
| CHTY - ST - ZIP | WINTER SPRINGS FL | | 1.4 00 | ry-st | - ZIP | | | | |
| TITLE | TD | DELETE | 21 TIT | | | | ······································ | Change | ☐ Addition |
| NAME | KLIMBERG, SUSAN D. | | 2.2 NA | ME | | | | | |
| STREET ADDRESS | 117 BROOKSHIRE COURT | | 2.3 ST | REET | ADDRESS | • | Agen 1 | | |
| CITY-ST-ZIP | WINTER SPRINGS FL | | 2. 4 CI | TY-S | T-ZIP | - 11 | Nam 3 | | |
| TITLE | | ☐ DELETE | 3.1 (1) | | - | | | Change | Addition |
| NAME | | | 3.2 NA | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | DELETE | 3.4. CI | | r-ZiP | | | Change | Addition |
| TITLE | | T"] NETELE | 4.1 Tf7 4. 2 N/ | | | | | L change | Addition |
| NAME | | | | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 4.4 CIT | | - ZIP | | | Change | Addition |
| NAME | | Fil pircit | 5.1 III 5.2 NA | | | | | change | L POUIDON |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| | | | | | | | | | |
| CITY - ST - ZIP | | ☐ DELETE | 5 4 CF | _ | -217 | | | Change | Addition |
| 1 | | | 1 | | | | | - Vienge | E. AUGIIUI) |
| NAME | | | 6.2 NA | | ADDRESS | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-7IP | | | 6.4 CI | 1Y-S1 | -211 | | | | |

14. I do 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.