FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000036223 (2)

FILED Mar 02 1998 8:00am Secretary of State

MUND	o e lectro	INICS, INC.						į					
Principal Plac	Address					((PB) (PD) AIN FDINF DIXA) NOVI (TD)(A 1874)	OBIEK INSE		A 1984 B 114 100	II			
5531 N W 72 AVE 5531 N W 72 AVE													
MIAMI FL 33166 MIAMI FL 33166									DO NOT WRITE II	N THIS S	PACE		
								-	3. Date Incorporated or Qualified		-		
									05/02/1995				ŀ
· ·	Place of Busines	2a. Mailing Address						4. FEI Number			Applied Fo)r	
21		26					65-0593153						
Suite, Apt	. #, etc.	Suite, Apt. #, etc.						5. Certificate of Status Desired			5 Additions	al le	
22 City & Sta	te .	City & State					e Finalisa Company Financia			Required			
23			28					6. Election Campaign Financing Trust Fund Contribution	П)0 May Be ad to Fees	' J	
Zip		Country				Country			8. This corporation owes or has paid	=			
24	25		29 30				Personal Property Tax du						
	9. Name an	Registered Agent						10. Name and Address of New Regi	stered A	gent			
K/	ass <mark>em,</mark> abbas	\$				81	Name						1
	10 S W 26 RD				62	Street A	Address (P.O. Box Number is Not Acceptable)			· · · · ·			
MI	IAMI FL 33129												
					i	B3							1
						84	City			FL	85 Z	ip Code	
11 Dureuppt	to the provision	e of Sections 607 0503	and 607 16	SOS Florida Statut	or the el	hove	-named		ation submits this statement for the num		changin	a ite ragiete	hor
office or	registered agent	or both, in the State of	Florida S	uch change was	d by	the corp	poration	ation submits this statement for the pur 's board of directors. I hereby accept	the appo	intment	as register	ed	
	am familiar with,	and accept the obligat	ions of, Sec	ction 607.0505, Fl	orida Stat	tutes	i.						
SIGNATURE	Signature, typed or p	onted name of registered agent	and title if Appl	icable (NOT	E Registere	d Aper	nt signature i	required w	when reinstaling)	DATE			
12.		OFFICERS AND	DIRECTOR	IS	13.	_ <u>-</u> -			ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECT	ORS IN 12	[
TITLE	P			DELETE	1.1 11	TLE				J.	Chang	je 🔲 Add	dition
NAME	HIJAZI, HASSAN A			1.2			1.2 NAME						5
STREET ADDRESS							1.3 STREET ADORESS						١
CITY-ST-ZIP		BLES FL 33156		T octor		ITY-SI	r-ZIP				10		<u></u>
TITLE	VP	4141)		DELETE	2 1 TI					L	Chang	e 🔲 Add	lition
NAME	HIJAZI, AD				2.2 N/								-
STREET ADDRESS	1341 LUGI	ABLES FL 33156					ADDRESS		3				
CITY-ST-ZIP TITLE	ST	IDEED I E 00100		DELETE	3.1 30	ITY-S	1-212		· · · · · · · · · · · · · · · · · · ·		Chang	e 🗆 Add	lition
NAME	KASSEM,	ABBAS I			3.2 N/		- 1			•			
STREET ADDRESS	340 SW 26						ADDRESS						- }
CITY-ST-ZIP	MIAMI FL				1	ITY-S	١.						
TITLE				☐ DELETE	4.1 TII		-				Chang	e 🔲 Add	lition
NAME					4. 2 N	AME							
STREET ADDRESS					4.3 ST	REET	ADDRESS						l
CITY-ST-ZIP					4.4 CI	TY-ST	r-ZIP						
TITLE]			DELETE	5.1 11	TLE					Chang	e 🗌 Add	lition
NAME]				5.2 NA	AME							
STREET ADDRESS					5.3 ST	REET /	address						
CITY-ST-ZIP					5.4 CI		ZIP				٦		
TITLE				☐ DELETE	6.1 T(1					L	Change	e Add	ition
NAME					6.2 NA		1						
STREET ADDRESS							ADDRESS))
CITY-ST-ZIP	L.,,	formation accombined with	The River	415. 6	6.4 CF	TY-ST		1 - 0	stice 440 07/2V/) Flexide Ctatutes I for		94 - 16 - 1 - 1		

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.