FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P95000038525 (8)

ELECTRO-KOMFORT CORPORATION

Principal Place of Business Mailing Address 5230 SOUTH WEST 6TH PLACE 5230 SOUTH WEST 6TH PLACE MARGATE FL 33068 MARGATE FL 33068 3. Date Incorporated or Qualified 3a. Date of Last Report 05/15/1995 NIA 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0591699 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Z_{10} Country Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SOTOLONGO, HECTOR Street Address (P.O. Box Number is Not Acceptable) 5230 SOUTH WEST 6TH PLACE MARGATE FL 33068 83 City 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. Signed rul, fyjred or printers name, of registered agent and that flaps reable (NOTE: Registered Agent signature required when reinstating OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1. 1 TITLE Change Addition SOTOLONGO, HECTOR NAME 1.2 NAME 5230 SOUTH WEST 6TH PLACE STREET ADDRESS 1.3 STREET ADDRESS MARGATE FL 33068 C(1):-51-2(P 14 CITY-ST-ZIP DELETE 7:116 2 1 TITLE Change Addition SOTOLONGO, ROSA CARMEN NAM6 22 NAME 5230 SOUTH WEST 6TH PLACE STREET ADDRESS 2.3 STREET ADDRESS MARGATE FL 33068 City St-709 2 4 CITY - ST - ZIP TITLE DELETE 3 1 TITLE Change Addition NAMI 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CHY-ST ZIE 3 4 CITY - ST - ZIP DELETE THE 4.1 TITLE ☐ Change Addition 5455 STREET ADDRESS 4.3 STREET ADDRESS CITY-ST 7IF 4.4 CITY - ST - ZIP DELETE THUE 5.1 TITLE Change Addition NAME 5.2 NAME SCHEEL ADDRESS 5 3 STREET ADDRESS CHY ST 28 5 4 CITY - ST - ZIP THEF □ DELETE 6 1 TITLE Change ☐ Addition NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. It 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 certify that I am an off-cer 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 13 if changed, or on an attachment with an address.

SIGNATURE

STREET ADDRESS

City-St-26

Com Carmen Jololongo Generation of Contraction of C

1/24/96 (954) 984-8799

CR2E034 (12/95)