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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000048292 (3)

FRANK ELECTRONICS, INC.

CITY - ST - ZIP

SIGNATURE:

Principal Pract 2210 JOG RO/ WEST PALM B		2210 JOG	Mailing Address 2210 JOG ROAD WEST PALM BEACH FL 33415-8016					
ļ							3. Date Incorporated or Qualified	
<u> </u>	lace of Business	2a. Mailin	g Address				4, FEI Number Applied For	
21	H	26	A - 1 4 - 4 - 4 - 1				65-0610915 Not Applica	
Suite, Apt.		27]	Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State	9	├ ~~~	State				6. Election Campaign Financing \$5.00 May Be	
23	0	28		T			Trust Fund Contribution Added to Fees	
Zip 24			Zip Country			8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No	,	
[24]	g. Name and Address of Cur	29 rent Registered /	Agent	30	Τ	· · · · · · · ·	10. Name and Address of New Registered Agent	
HAF	RT, FRANK S				81	Name		\Box
	0 JOG ROAD				82	Street A	Address (P.O. Box Number is Not Acceptable)	—
	ST PALM BEACH FL 33415				0.2	SILBELLY	Address (F.O. pox rightler is not Addeptable)	_
					83			
					84	City	FL 85 Zip Code	
11 Purcuant	to the againstone of Sections 607	1502 and 607 150	8 Florida Statu	loc the i	abovis	e-named c	corporation submits this statement for the purpose of changing its register	red
office or r	egistered agent, or both, in the St	ate of Florida, Suc	ch change was	authoriz	ed by	the corpo	poration's board of directors. I hereby accept the appointment as registere	d
_	m tamiliar with, and accept the of	oligations of, Section	on 607.0505, FI	orida Sia	alutes	S.		
SIGNATURE	Signature typed or protectinamic of registerion	J agent and title κ applica	able. (NO	TE Register	ed Age	ent signature r	e required when reinstating) DATE	
12.	OFFICERS	AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Tillef	D		☐ DELETE		1.1 TITLE		☐ Change ☐ Addi	tion
NAME	HART, FRANK S			1.23	NAME]
STHEET ADDRESS	600 CROSSWINDS #B-2			1.3	STREET	ADDRESS		-
CITY+ST-ZiP	GREENACRES FL 33413			1.4	CITY - S	T-ZIP		
THILE		DELETE		2.1	2.1 TITLE		Change Addi	tion
NAME				2.2	NAME			
STREET ADDRESS				2.3	STREET	ADDRESS		
CHY-ST-ZIP	a transmitted and the second and the		05:555		CITY-	ST-ZIP		
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NAME					NAME			
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NAME					NAME			
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NAME CYCCEL ADDDGGG						ADDRESS		
STREET ADDRESS				1		ADDRESS	1	
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			piccic				_ Smarge _ rec	
NAME BYOVER APPRIATE					NAME	4000000		
STREET ADDRESS	1			b.3	OIKEE)	ADDRESS	1	- 1

14. I do hereby certify that the information supplied with this thing does not qually for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report surve 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 truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on a attachment with an address.