

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000050434 (6)

1. Corporation Name

SOUTHERN MICRO ETCH, INC.



Principal Place of Business

2738 N.E. 29 ST.
LIGHTHOUSE POINT FL 33064

Mailing Address

2738 N.E. 29 ST.
LIGHTHOUSE POINT FL 33064

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

Country

29

Zip

30

Country

g. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

3. Date Incorporated or Qualified

06/28/1995

3a. Date of Last Report

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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.

SIGNATURE

Signature of the person authorized to sign for the corporation

Signature of the person authorized to sign for the corporation

DATE

12. OFFICERS AND DIRECTORS

1. NAME
2. STREET ADDRESS
3. CITY, ST., ZIP
4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY, ST., ZIP
8. TITLE
9. NAME
10. STREET ADDRESS
11. CITY, ST., ZIP
12. TITLE
13. NAME
14. STREET ADDRESS
15. CITY, ST., ZIP
16. TITLE
17. NAME
18. STREET ADDRESS
19. CITY, ST., ZIP
20. TITLE

PTD
WAGNER, WOLFGANG C
2738 N.E. 29 ST.
LIGHTHOUSE POINT FL 33064
VSD
MULLINS, ROBERT M
2738 N.E. 29 ST.
LIGHTHOUSE POINT FL 33064

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST., ZIP
5. 1. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, ST., ZIP
9. 1. TITLE
10. NAME
11. STREET ADDRESS
12. CITY, ST., ZIP
13. 1. TITLE
14. NAME
15. STREET ADDRESS
16. CITY, ST., ZIP
17. 1. TITLE
18. NAME
19. STREET ADDRESS
20. CITY, ST., ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

14. I 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)(g), 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 attached statement of address.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/96

Date

Daytime Phone #

CR2E034 (12/95)