

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

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Mar 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000053248 (7)
 1. Corporation Name
GENERAL APPLIED TELECOMMUNICATIONS & ELECTRICAL SUPPORT-USA CORPORATION

Principal Place of Business 3191 CRYSTAL WAY MIRAMAR FL 33025	Mailing Address 3191 CRYSTAL WAY MIRAMAR FL 33025
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/11/1995	
21 Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	25 Suite, Apt. #, etc.	26 City & State
27 Zip	28 Country	29 Zip	30 Country	4. FEI Number 65-0597173	Applied For <input type="checkbox"/> Not Applicable
9. Name and Address of Current Registered Agent MALMS, ARTHUR S 1220 S.W. 111TH AVENUE PEMBROKE PINES FL 33025				10. Name and Address of New Registered Agent	
				81 Name ALEXANDER S. RODRIGUEZ	
				82 Street Address (P.O. Box Number is Not Acceptable) 3191 CRYSTAL WAY	
				83 City MIRAMAR	
				84 City MIRAMAR	85 Zip Code 33025
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.					
SIGNATURE <i>Alexander S. Rodriguez</i> ALEXANDER S. RODRIGUEZ				DATE	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	POC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, ALEXANDER S	1.2 NAME	
STREET ADDRESS	3191 CRYSTAL WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33025	1.4 CITY-ST-ZIP	
TITLE	VDC <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALMS, ARTHUR S	2.2 NAME	
STREET ADDRESS	1220 S.W 111TH AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33025	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, ELIZABETH L	3.2 NAME	
STREET ADDRESS	3191 CRYSTAL WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33025	3.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LISONDRA, ABUNDIA B	4.2 NAME	
STREET ADDRESS	1220 S.W. 111TH AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33025	4.4 CITY-ST-ZIP	
TITLE	PRO <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LISONDRA, JESUSA B	5.2 NAME	
STREET ADDRESS	1220 S.W. 111TH AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33025	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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.

SIGNATURE: *Alexander S. Rodriguez* (954)431-1232

CR2E034 (10/97)