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

PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000055146 (1) DOCUMENT #
1. Corporation Name

ELECTRONIC DESIGN & REPAIR, INC.

Principal Place	of Business	Mailing Address				1 18 0110 01 110 10101 01111 00111 00111	***************************************	. #1181 1181	, 4.618 hill (84)
8253 CASSI/ TAMARAC FI		8253 CASSIA TERRAC TAMARAC FL 33321	8253 CASSIA TERRACE TAMARAC FL 33321						
						3. Date Incorporated or Qualified 07/12/1995	3a. Date o	f Last Re	pod
 Principal Pla 	ace of Business	2a. Mailing Address 26			4. FE! Number 65-0596567		Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State				Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees		
Ζιρ 24	Country 25	Zip 29	30 Cou	ntry		8. This corporation has liability for in Florida Statutes Yes	M No		199.032,
	g. Name and Address of Curre	nt Registered Agent		81	Mana	10. Name and Address of New R	egistered A	gent	
I/I IAA4	1F)			"	Name				
KURDZIEL, TED				82	Street Addres	s (P.O. Box Number is Not Acceptabl	e)		
8253 CASSIA TERRACE TAMARAC FL 33321				83					
IAMAN	AO FE 33321					·	<u></u>		
				84	City		FL	85 Zir	Code
SIGNATURE _	Signature, typed or printed name of registered agen	I and title if applicable. (NO	TE Registered	Agent	signature required v	iner reinstaling; ADDITIONS/CHANGES TO OFFI	DATE CERS AND [DIRECTO	RS IN 12
TITLE	P DELETE KURDZIEL, TED 8253 CASSIA TERRACE TAMARAC FL 33321		1.17	ITLE				Change	☐ Addition
NAME			1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - S1 - ZIP						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					I - ZIP				
TITLE	SD DELETE		2. 1 1	TLE		Chan		Change	Addition
NAME	KURDZIEL, LAURIE		2 2 N						
STREET ADDRESS	8253 CASSIA TERRACE TAMARAC FL 33321		1		ADDRESS				
CITY-ST-ZIP TITLE	DELETE		2.4 C	TY-SI	T-ZIP	Change		Change	e 🗍 Addition
NAME			3 2 NA		}			Jango	
STREET ADDRESS					ADDRESS				
CiTY-ST-ZIP				ITY-S1					
TITLE		☐ DELETE						Change	☐ Addition
NAME			42 N	AME					
STREET ADDRESS			4.3 S	TREET	ADDRESS				•
CITY-ST-ZIP				11Y-S	T-ZIP				
TITLE		☐ DELETE	5. 1 TITLE					Change	Addition
NAME			5.2 N						
STREET ADDRESS					ADDRESS				
C-TY-ST-Z-P				ITY - \$1	T- ZIP				
TITLE		DELETE	6.1	TILE	1	•		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)(k), Fiorida 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 cath; 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 chapted, or on an attachment with an address. Kurdzie |

6 3 STREET ADDRESS

STREET ADDRESS