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Apr 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000068393 (4)**

1. Corporation Name

ACTIVE ELECTRONIC SUPPLY AND MANUFACTURING, INC.



Principal Place of Business 831 VILLAGE BLVD., #905-392 WEST PALM BEACH FL 33409	Mailing Address 931 VILLAGE BLVD., #905-392 WEST PALM BEACH FL 33409-1944
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/08/1995		3a. Date of Last Report 01/26/1996	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 65-0605471		Applied For Not Applicable	
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**MULLIN, JAMES G
2263 NW BOCA RATON BLVD., #205
BOCA RATON FL 33431**

10. Name and Address of New Registered Agent

81 Name Valdes-Fauli Corporate Services, Inc.	85 Zip Code FL 33401
82 Street Address (P.O. Box Number is Not Acceptable) 777 South Flagler Drive, Suite 500-East	
83 City West Palm Beach	

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 *Kenneth M. Mullen* DATE **4/21/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE Director & Vice President	1.1 TITLE Joseph Mancino, Dir & Vice-President	TITLE Director & Vice President	2.1 TITLE Ricardo De Govia
NAME DIROMA, MARIA	1.2 NAME 2263 NW Boca Raton Blvd., #205	NAME MULLIN, JAMES G	2.2 NAME 3130 Jasmine Court
STREET ADDRESS 1050 S PARKSIDE GREEN DRIVE	1.3 STREET ADDRESS Boca Raton, Florida 33431	STREET ADDRESS 2263 NW 2ND AVE. #205	2.3 STREET ADDRESS Delray Beach, FL 33483
CITY-ST-ZIP WEST PALM BEACH FL 33415	1.4 CITY-ST-ZIP	CITY-ST-ZIP BOCA RATON FL	2.4 CITY-ST-ZIP
TITLE Director & Vice President	3.1 TITLE Director and Vice President & Asst. Sec.	TITLE Director & Vice President	4.1 TITLE President & Secretary
NAME MULLIN, JAMES G	3.2 NAME Maxime F. Jean-Louis	NAME MULLIN, JAMES G	4.2 NAME Paula De Govia
STREET ADDRESS 2263 NW 2ND AVE. #205	3.3 STREET ADDRESS 2263 NW Boca Raton Blvd., #205	STREET ADDRESS 2263 NW 2ND AVE. #205	4.3 STREET ADDRESS 2263 NW Boca Raton Blvd., #205
CITY-ST-ZIP BOCA RATON FL	3.4 CITY-ST-ZIP Boca Raton, FL 33431	CITY-ST-ZIP BOCA RATON FL	4.4 CITY-ST-ZIP Boca Raton, FL 33431
TITLE Director & Vice President	5.1 TITLE	TITLE Director & Vice President	5.2 TITLE
NAME MULLIN, JAMES G	5.2 NAME	NAME MULLIN, JAMES G	5.3 NAME
STREET ADDRESS 2263 NW 2ND AVE. #205	5.3 STREET ADDRESS	STREET ADDRESS 2263 NW 2ND AVE. #205	5.4 STREET ADDRESS
CITY-ST-ZIP BOCA RATON FL	5.4 CITY-ST-ZIP	CITY-ST-ZIP BOCA RATON FL	6.1 CITY-ST-ZIP
TITLE Director & Vice President	6.1 TITLE	TITLE Director & Vice President	6.2 TITLE
NAME MULLIN, JAMES G	6.2 NAME	NAME MULLIN, JAMES G	6.3 NAME
STREET ADDRESS 2263 NW 2ND AVE. #205	6.3 STREET ADDRESS	STREET ADDRESS 2263 NW 2ND AVE. #205	6.4 STREET ADDRESS
CITY-ST-ZIP BOCA RATON FL	6.4 CITY-ST-ZIP	CITY-ST-ZIP BOCA RATON FL	

14. I do 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 *Maxime F. Jean-Louis* DATE **4/24/97** 561 471-9200

CR2E034 (9/96)