

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000079037 (4)

1. Corporation Name

MERIT ELECTRONICS, INC.



Principal Place of Business

Mailing Address

3691 NW 15TH ST
LAUDERHILL FL 33311

3691 NW 15TH ST
LAUDERHILL FL

2. Principal Place of Business

2a. Mailing Address

21 3691 NW 15TH ST

26 3691 NW 15TH ST

Suite, Apt #, etc

Suite, Apt #, etc

City & State

City & State

23 LAUDERHILL FL

28 LAUDERHILL FL

Zip

Country

Zip

Country

24 33311

25 USA

29 33311

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STUMBO, JOE
334 SW 88TH AVE #202
PEMBROKE PINES FL 33025

81 Name Joseph Stumbo
82 Street Address (P.O. Box Number is Not Acceptable) 3691 NW 15TH ST.
83
84 City Lauderhill FL 85 Zip Code 33311

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

Joseph Stumbo

Joseph Stumbo

7/10/96

Signature typed in print of the registered agent and the appointing officer.

Signature typed in print of the registered agent and the appointing officer.

Signature typed in print of the registered agent and the appointing officer.

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	Change	Addition
	JOSEPH STUMBO	334 SW 88TH AVE.	PEMBROKE PINES FL 33025	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Joseph Stumbo Pres. Joseph Stumbo Pres. 7/10/96

954

316-8989

Signature and typed or printed name of signing officer or director.

or

Signature and typed or printed name of signing officer or director.

CR2E034 (3/96)