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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of \$tate DIVISION OF CORPORATIONS

DOCUMENT # P9600002457 (5)

EVENT E	ELECTRONIC ASSEMBLY,	INC.					 		
Principal Place of Business Mailing Address							 	Majai Afilb iinii Aifai	B
13712 BETH ST N 13712 BETH ST N UNIT A UNIT A									
LARGO FL 34641 LARGO FL 33771-4949									
		······					3. Date Incorporated or Qualified 01/04/1996	3a. Date of La	ist Report
2. Principal P	2. Principal Place of Business 2a. Mailing Address 26						4. FEI Number 59-3287168	2	Applied For Not Applicable
Sulte, Apt.	#, etc.	27 St	uite, Apt. #, etc.				5. Certificate of Status Desired	┌ \$8.7	75 Additional e Required
City & Stat	e	C	ity & State				6. Election Campaign Financing		.00 May Be
			Ooun	ry		Trust Fund Contribution  8. This corporation has liability for in	inlangible tax und	ded to Fees der s. 199.032,	
24 331	9, Name and Address of Curre	29 nt Pagister	ad Agant	30			Florida Statutes  10. Name and Address of New Re	Yes No	
CVA	NS, STANLEY F	nit negister	en Agent	8	1 Nan	ne	IV. Name and Address of New Ne	gistered Agent	
	2 66TH ST N			8	2 Stre	et Addre	ess (P.O. Box Number is Not Acceptate	ole)	
UNIT A				[8					
LARGO FL 34641				8		<del>_</del>		<b>—. 8</b> 5	Zip Code
	_							FL 1	` i
office or r agent. I a SIGNATURE	registeren agent, di both, in the Stal am familiar vith, and accept the obli- signarie, typed or printed in the tropistered si		Z_C				oration submits this statement for the pon's board of directors. I hereby acceptions thereby acceptions the properties of the properties o	of the appointmen	nt as registered
12.	OFFICERS AI			13.		· · · · ·	ADDITIONS/CHANGES TO OFFICE	ERS AND DIBEC	TORS IN 12
TITLE	OP	☐ DELETE 1.1 T		1.1 TOL				<b>▼</b> Cha	nge [] Addition
NAME	EVANS, STANLEY F			1.2 NAV	E				
STREET ADDRESS	13712 66TH ST N UNITA LARGO FL 34641			1	ET ADDRES	SS	p 33771		}
CITY-ST-ZIP TITLE	LANGO FL 34041		DELETE	1.4 CITY 2.1 TITU	- S1 - 7IP	- 21	7 30771	Cha	nge
NAME				22 NAM		Ì			ngo
STREET ADDRESS					- et adores	is l			
CITY-ST-ZIP				2.4 CIT	'- \$1 - ZIP				ĺ
TITLE			DELETE	3.1 1111				Cha	nge Addition
NAME				3.2 NAM	E	Ì			Ì
STREET ADDRESS				3 3 B1RE	E1 ADDRES	is			
CITY-ST-ZIP			T St. FT.		'- \$1 - ZIP				
TITLE			☐ DELETE	4.1 1170				∟ Cha	nge [_] Addition
NAME	}			4, 2 NAN		.			}
STREET ADDRESS					ET ADDRES	>>			
CITY-ST-ZIP TITLE			DELETE	5.1 IIIL	-ST-ZIP	_		Cha	nge Addition
NAME				5.2 NAM					
STREET ADDRESS					et addre:	ss			j
CITY-ST-ZIP					- ST - ZIP				
TITLE			DELETE	61 TITL				☐ Cha	nge Addition
NAME				6.2 NAM		}			
STREET ADDRESS					ET ADDRES	SS			ĺ

CMSNAAHIJEL

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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this apport as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

**FILED** 

May 02 1997 8:00am

Secretary of State