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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600002535 (8)

ACTIVE COMPONENTS, INC.

FILED

May 02 1997 8:00am

Secretary of State

Principal Place of Business Mailing A		Mailing Address		·	T COUNTRY THE COURT OF THE COUR	11 00 111 00 140 11 00 1 0111	I
818 W. UNIVERSITY AVE. S-212 Gainesville fl 32601			B18 W. UNIVERSITY AVE. S-212 Gainesville FL 32601-5171				
					3. Date Incorporated or Qualified 01/01/1996	3a. Date of La	st Report
2. Principal P	ace of Business	26. Mailing Address			4. FEI Number 59 - 335329 1		Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional e Required
City & State	0	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be
23] Zip	Country	Zip	Count	ry	8. This corporation has liability for		
24	9. Name and Address of Curre	29 nt Registered Agent	[30]		10. Name and Address of New Re		
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	NESVILLE FL 32601				dress (P.O. Box Number is Not Acceptate	—————	
			L	3			
			["	4 City		FL I	Zip Code
■■ Burniard	to the provisions of Sections 607,050	02 and 607.1508, Florida Stati	ites, the abo	ve-named cor	rporation submits this statement for the	ourpose of changi	ng its registered
office of t	agistored agent or both in the State						it do logistorou
office or r agent. La	to the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the oblig	ations of Section 607.0505, F	lorida Statul	les.	ation's position directors, i hereby acce,		
office or r agent. La SIGNATURE							
	Sometical region or proved many of registered ag				uired when roinstating) ADDITIONS/CHANGES TO OFFIC	DATE	
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and necessary man me information supplied with this ming 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 of supplemental annual report is the 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 frusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an attachment with an address.

SIGNATURE: