PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000008655**1. Corporation Name

CAMERA & ELECTRONICS, INC.

Principal Place of Business 7717 TURKEY LAKE ROAD ORLANDO FL 32819 Mailing Address

7717 TURKEY LAKE ROAD ORLANDO FL 32819

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90053 031 ***150.00



DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualifed 01/24/1996			
		10.00			4. FEI Number		plied For	1
	ace of Business	2a. Mailing Address					t Applicable	l
21		26			59-3366678			l
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired See Required Fee Required			_
City & State City & State					6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added t	· 1	
Zip	Country Zip			у	8. This corporation owes the current year Int.	angible		l
24	25 29 30			•	Personal Property Tax. Yes No			l
24]	9. Name and Address of Current	11	2)		10. Name and Address of New Registered	Agent		
	o. Halle alla Addidoo oi dallois	The state of the s	8	1 Name				
NAYE	EE, TULSIDAS							
	ORANGE LAKE DRIVE		82 Street Add		dress (P.O. Box Number is Not Acceptable)			
	ANDO FL 32817		8:	•				ł
OND	-14DO 1 L 32017		0	3				İ
•			8-	4 City		85 Zip (Code	İ
					<u>FL</u>			
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abo	ve-named corp	poration submits this statement for the purpose of	changing its	registered	İ
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	n Florida, Such change was auth ons of, Section 607,0505, Florid	ionzed b a Statute	y the corporations.	ion's board of directors. I hereby accept the appoin	innent as re	gistered	
					U 19	-9		ļ
SIGNATURE	Signature, typed or printed name of registered agent	and title if another (NOTE: Re	egistered Ag	ent signature require	red when reinstating) DATE			2
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN			8
TITLE	PD	☐ DELETE	1.1 TITLE			Change	☐ Addition	1
NAME	NAYEE, TULSIDAS		1.2 NAME	:	•			5
STREET ADDRESS	3815 ORANGE LAKE DR.		1.3 STRE	ET ADDRESS	•			l C
CITY-ST-ZIP	ORLANDO FL 32817		1.4 CITY-				l	5
TITLE	SD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition	2
l :	NAYEE, HANSA	_	2.2 NAME				1	1
NAME	•						l	
STREET ADORESS	3815 ORANGE LAKE DR.			ET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32817		.2.4 CITY			Change	Addition	
MLE	•	DELETE	3.1 TITLE					
NAME			3.2 NAME					
STREET ADDRESS			3.3 STRE	ET ADDRESS				
CITY-ST-ZIP	14.6.400		3.4. CITY				☐ A autora ::	┨
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADDRESS			l	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				Į
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NAME	:			'	}
STREET ADDRESS			5.3 STRE	ET ADDRESS			I	1
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		DELETE	6.1 TITLE			☐ Change	☐ Addition	1
NAME		_	6.2 NAME	:				
			L	ET ADDRESS				
STREET ADDRESS				ET 7/B			l	

14. I 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 attactment with an address with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DESIGNS OF DIRECTOR

42/99

Daytime Phone #