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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600009972

STREET ADDRESS

CITY-ST-ZIP

ZALCAR ELECTRONICS, INC.

								(
Principal Place	e of Business	Mailing Ad	ddress	_	-			I 38111 88118 18118 18	
1026 SW 12TH	TERRACE	1026 SW 12TH TERRACE							
BOCA RATON I		BOCA RAT	BOCA RATON FL 33486				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualifed	11110 01 100	
							01/01/1996		
2 Principal P	lace of Business	2a. Mailing	g Address				4. FEI Number		Applied For .
21	ide of Badinoss	26	3 · · · · · · · · · · · · · · · · · · ·				65-0628307		Not Applicable
Suite, Apt.	#, etc.		Apt. #, etc.	_			_	\$8.75	Additional
22		27					5. Certifcate of Status Desired	Fee	Required
City & Stat	te	City &	State	_			6. Election Campaign Financing		0 May Be
23		28		_			Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip		Cou	ntry		8. This corporation owes the current year.		r=1.1.
24	25	29		30			Personal Property Tax.	VZ Yes_	□No
	9. Name and Address of Curr	ent Registered A	Agent		81	Nama	10. Name and Address of New Regis	terea Agent	
DOM	AUGE MAUDICE I				01	Name	••		
DONAHUE, MAURICE L					82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
1026 SW 12TH TERRACE BOCA RATON FL 33486					83		Petral of alle V (Figure 2) in all	152 14913 14" 8.3	15 15 20 1 15 25 1
ВОС	A NATUN FL 33400				63				
					84	City	कुर्त कुर्रेड के निवस्ति संस्थान निवस है है जा के के	85 Zi	p Code
L		-00 1 007 4500	D Florido 64-1-4	-		nomed cor	poration submits this statement for the purp	ose of changing	its registered
office or r	registered agent, or both, in the Stat	e of Florida, Sucl	h change was a	∟thoπzeα	ı bv tr	he corporat	tion's board of directors. I hereby accept the	appointment as	registered
agent. I a	m familiar with, and accept the obli	gations of, Sectio	n 607.0505, Flo	rida Statu	utes.				
SIGNATURE	Signature, typed or printed name of registered a	and and title if applicab	la (NOTE	Registered	Agent	signature recur	red when reinstating) , y , D	ATE	\
12.		AND DIRECTORS	<u>`</u>	13.	3		ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12
TITLE	D		DELETE	1.1 111	rle		7.5%	☐ Chang	e Addition
NAME	_								Be Dyongon
DESCRIPTION OF THE PROPERTY OF	DONAHUE, MAURICE L			1.2 NA	ME		* ST 28		e Dividingui
I STREET AUDRESS	DONAHUE, MAURICE L 1026 SW 12TH TERRACE			1		ADDRESS	1 A 1 M		geAddition
STREET ADDRESS CITY-ST-ZIP	1026 SW 12TH TERRACE			1.3 ST				<u> </u>	.,
CITY-ST-ZIP			☐ DELETE	1.3 ST	REET A		-	☐ Chang	
CITY-ST-ZIP	1026 SW 12TH TERRACE		☐ DELETE	1.3 ST 1.4 CF	TY-ST- TLE			•	
CITY-ST-ZIP TITLE	1026 SW 12TH TERRACE BOCA RATON FL 33486		☐ DELETE	1.3 ST 1.4 CF 2.1 TH 2.2 NA	TREET A TY-ST- TLE AME			•	
CITY-ST-ZIP TITLE NAME	1026 SW 12TH TERRACE BOCA RATON FL 33486		☐ DELETE	1.3 ST 1.4 Cr 2.1 TT 2.2 NA 2.3 ST	TREET A TY-ST- TLE AME	-ZIP ADDRESS	-	Chang	ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1026 SW 12TH TERRACE BOCA RATON FL 33486		☐ DELETE	1.3 ST 1.4 Cr 2.1 TT 2.2 NA 2.3 ST	TY-ST- TLE AME TREET A	-ZIP ADDRESS		•	ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1026 SW 12TH TERRACE BOCA RATON FL 33486			1.3 ST 1.4 CC 2.1 TT 2.2 NA 2.3 ST 2.4 CC	TY-ST- TLE AME TREET A TLE	-ZIP ADDRESS		Chang	ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1026 SW 12TH TERRACE BOCA RATON FL 33486			1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 CF 3.1 TH 3.2 NA	TY-ST- TLE AME TREET A TLE TREET A TLE AME	-ZIP ADDRESS	. Hores	Chang	ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1026 SW 12TH TERRACE BOCA RATON FL 33486			1.3 ST 1.4 Cf 2.1 Tff 2.2 NA 2.3 ST 2.4 Cf 3.1 Tff 3.2 NA 3.3 ST	TY-ST- TLE AME TREET A TLE TREET A TLE AME	ADDRESS - ZIP		Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1026 SW 12TH TERRACE BOCA RATON FL 33486			1.3 ST 1.4 Cf 2.1 Tff 2.2 NA 2.3 ST 2.4 Cf 3.1 Tff 3.2 NA 3.3 ST	TREET A TY-ST- TLE AME TTY-ST- TLE AME TREET A TLE TREET A	ADDRESS - ZIP		Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1026 SW 12TH TERRACE BOCA RATON FL 33486		□ DELETE	1.3 ST 1.4 CC 2.1 TM 2.2 NA 2.3 ST 2.4 CC 3.1 TM 3.2 NA 3.3 ST 3.4 CC	TREET A TY-ST- TLE AME TY-ST- TLE AME TREET A TREET A TREET A TREET A TREET A	ADDRESS - ZIP		Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1026 SW 12TH TERRACE BOCA RATON FL 33486		□ DELETE	1.3 ST 1.4 CC 2.1 TTI 2.2 NA 2.3 ST 2.4 CC 3.1 TTI 3.2 NA 3.3 ST 3.4 .C 4.1 TTI 4.2 N	TREET A TY-ST- TLE AME TREET A TLE AME TREET A TLE TREET A TLE TREET A TLE TREET A	ADDRESS - ZIP		Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	1026 SW 12TH TERRACE BOCA RATON FL 33486		☐ DELETE	1.3 ST 1.4 CC 2.1 TM 2.2 NA 2.3 ST 2.4 CC 3.1 TM 3.2 NA 3.3 ST 3.4 CC 4.1 TM 4.2 NA 4.3 ST	TREET A TY-ST- TLE AME TREET A TLE AME TREET A TLE TREET A TLE TREET A TLE TREET A	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP ADDRESS		☐ Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1026 SW 12TH TERRACE BOCA RATON FL 33486		□ DELETE	1.3 ST 1.4 CT 2.1 TH 2.2 NA 2.3 ST 2.4 CO 3.1 TH 3.2 NA 3.3 ST 3.4 C 4.1 TH 4.2 N 4.3 ST 4.4 CO 5.1 TH 5.1	TY-ST- TLE AME TY-ST- TLE TLE TLE TLE TLE TLE TLE TL	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP ADDRESS		Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	1026 SW 12TH TERRACE BOCA RATON FL 33486		☐ DELETE	1.3 ST 1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CF 3.1 TIF 3.2 NA 3.3 ST 3.4 CF 4.1 TIF 4.2 N 4.3 ST 4.4 CF 5.1 TIF 5.2 NA	TY-ST- TLE AME TY-ST- TLE AME TREET A TIT-ST- TLE AME TREET L TTY-ST- TLE TTY-ST- TLE TTY-ST- TLE AME TREET L TTY-ST- TLE AME	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP		☐ Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1026 SW 12TH TERRACE BOCA RATON FL 33486		☐ DELETE	1.3 ST 1.4 CC 2.1 TTC 2.2 NA 2.3 ST 2.4 CC 3.1 TTC 3.2 NA 3.3 ST 3.4 CC 4.1 TTC 4.2 NA 4.3 ST 4.4 CC 5.1 TTC 5.2 NA 5.3 ST	TY-ST- TLE AME TY-ST- TLE AME TREET A TLE AME TREET A TLE TREET A TT-ST- TLE AME TREET A TT-ST- TLE TT-ST- TT- TT- TT- TT- TT- TT- TT- TT-	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP		☐ Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1026 SW 12TH TERRACE BOCA RATON FL 33486		DELETE DELETE DELETE	1.3 ST 1.4 Cf 2.1 Tf 2.2 NA 2.3 ST 2.4 Cf 3.1 Tf 3.2 NA 3.3 ST 3.4 C 4.1 Tf 4.2 N 4.3 ST 4.4 Cf 5.1 Tf 5.2 NA 5.3 ST 5.4 Cf	TY-ST- TLE AME TY-ST- TLE AME TY-ST- TLE AME TREET / TLE AME TREET / TLE AME TREET / TTY-ST- TLE AME TREET / TTY-ST- TLE TREET / TTY-ST- TLE TREET / TY-ST- TLE TREET / TY-ST- TREET / TY-ST-	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP		Chang	e Addition ge Addition ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1026 SW 12TH TERRACE BOCA RATON FL 33486		☐ DELETE	1.3 ST 1.4 Cf 2.1 Tff 2.2 NA 2.3 ST 2.4 Cf 3.1 Tff 3.2 NA 3.3 ST 3.4 Cf 4.1 Tff 4.2 NA 4.3 ST 4.4 Cf 5.1 Tff 5.2 NA 5.3 ST 5.4 Cf 6.1 Tff	TY-ST- TLE AME TY-ST- TLE THE TY-ST- TLE AME TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP		☐ Chang	e Addition ge Addition ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1026 SW 12TH TERRACE BOCA RATON FL 33486		DELETE DELETE DELETE	1.3 ST 1.4 Cf 2.1 Tff 2.2 NA 2.3 ST 2.4 Cf 3.1 Tff 3.2 NA 3.3 ST 3.4 C 4.1 Tff 4.2 N 4.3 ST 4.4 Cff 5.1 Tff 5.2 NA 5.3 ST 5.4 Cf 6.1 Tff 6.2 NA	TY-ST- TLE AME TY-ST- TLE AME TY-ST- TLE AME TY-ST- TLE	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP		Chang	e Addition ge Addition ge Addition

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 attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

Jan 29, 1999 8:00 am Secretary of State

01-29-1999 90030 049 ***150.00