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

PROFIT CORPORATION **ANNUAL REPORT**

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000013925 (8)

ELECTRO-MECHANICAL CONCEPTS, INC.

Principal Place of Business Mailing Address 6210 N LOCKWOOD RDG RD P O BOX 7776 SUITE 346 SARASOTA FL 34243 DO NOT WRITE IN THIS SPACE SARASOTA FL 34235 3. Date Incorporated or Qualified <u>02/14/1996</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 GZID N. LOCKWOOD RICHERO 21 65-0648060 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 5te, 346 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П Trust Fund Contribution Added to Fees Country Country Sarasota Zip 8. This corporation owes or has paid the current year Intangible 34243 24 25 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GAY, JORDAN 4822 SEVILLE DR. 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34235 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE Change TITLE 1.1 TITLE NAME **ALBRECHT, HORST** 1.2 NAME 4822 SEVILLE DR. STREET ADDRESS 1.3 STREET ADDRESS **SARASOTA FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE fм Change Addition 21 TITLE **GAY, JORDAN** NAME . 2.2 NAME 4822 SEVILLE DR. STREET ADDRESS 2.3 STREET ADDRESS **SARASOTA FL** CITY-ST-ZIP 2. 4 CITY - ST-ZiP DELETE Addition TITLE Change 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-2IP 54 CITY-ST-ZIP DELETE TITLE 61 TITLE Change ☐ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

horan/ Gad SIGNATURE:

6.4 CITY-ST-ZIP 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 on 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 innan attachment with an address.

FILED

May 13 1998 8:00am

Secretary of State